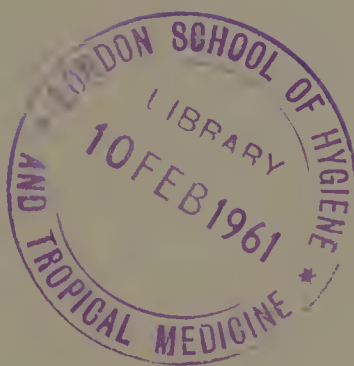


27
Coventry 1958





Tile Hill Health Centre, Coventry. General View, GP Unit on left ; M & CW and School Health on right



Tile Hill Health Centre GPs' Unit.



Tile Hill Health Centre GPs' Unit. General Waiting Room

CITY OF



COVENTRY

THE HEALTH SERVICES OF COVENTRY IN 1958

BEING THE

ANNUAL REPORT

BY THE MEDICAL OFFICER OF HEALTH

T. MORRISON CLAYTON

M.D., B.S., B.Hy., D.P.H.

CONTENTS

	Page
Public Health and Pensioners' Committees	3
Public Health Staff	4—7
M.O.H. Survey and City's Vital Statistics	8—18
Poliomyelitis	20
Tuberculosis and Mass Radiography	21—24
Venereal Diseases	21
National Health Service Act, 1946	24—90
Mental Health	82—90
National Assistance Act, 1948	91
Water Supply and Analyses	92—93
Staff Changes	96
Public Health Inspection Service	97—164
Housing, Slum Clearance and Overcrowding	108—111
Air Pollution	114—124
Public Abattoir, Inspection and Supervision of Food Supplies	126—154
Food Hygiene	154—155
Factories' Act, 1937 and 1948	159—160
Rodent Control	161—162
Statistical Tables and Charts	165—179

HEALTH COMMITTEE

(As at 31st December, 1958)

Chairman—Councillor R. LOOSLEY.

Vice-Chairman—Councillor R. NICKSON.

The Lord Mayor (Alderman H. H. K. WINSLOW, J.P.).

The Deputy-Mayor (Alderman W. H. EDWARDS).

Alderman Mrs. E. A. ALLEN.

Alderman W. CALLOW.

Alderman B. H. GARDNER.

Councillor K. B. BENFIELD

Councillor W. A. BINKS.

Councillor Mrs. E. JONES.

Councillor T. L. K. LOCKSLEY.

Councillor C. D. SWAIN.

Dr. J. BALLANTINE (nominated by the
Coventry Branch of the British
Medical Association).

Mr. H. C. HANNAM-CLARK (nominated by No. 20 Group Hospital
Management Committee).

Dr. N. J. L. ROLLASON (nominated by
the Coventry Executive Council).

Co-opted for Purpose
of National Health
Service Act Functions

PENSIONERS COMMITTEE

(until June 1st, 1958).

Chairman—Councillor A. D. SMITH.

Vice-Chairman—Councillor H. STANLEY.

The Lord Mayor (Alderman H. H. K. WINSLOW, J.P.)

The Deputy-Mayor (Alderman W. H. EDWARDS.)

Councillor E. A. HULL.

Councillor B. R. PULLINGER.

Vacant.

Councillor C. WARD.

Co-opted Members :—

Mrs. H. ASHBY.

Mrs. E. M. GARDNER.

Mrs. M. JEFFS.

Mr. O. NEALE.

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health, Principal School Medical Officer, Medical Adviser to the Pensioners Committee and to the Children's Committee :

T. M. Clayton, M.D., B.S., B.Hy., D.P.H.

Deputy Medical Officer of Health :

J. Ardley, M.B., B.S., D.P.H.

Senior Assistant Medical Officer for Maternity and Child Welfare :

Janet Margaret Done, M.D., B.S., D.P.H., D.R.C.O.G.

Assistant Medical Officers :

Doreen J. Dicks M.B., Ch.B., L.R.C.P., M.R.C.S., D.C.H.

C. M. McGregor B.Chir., M.B.

G. Phillips, M.B., Ch.B.

Marion Hommers, M.B., Ch.B.

Sarah N. Joseph M.B.B.S., D.R.C.O.F.

Mary G. Lernihan, M.B., Ch.B., D.C.H., D.P.H.

Mary A. H. Lawson, M.B., B.Ch. B.A.O., D.P.H.

J. M. B. Porter, L.R.C.P., L.R.C.S.

Veterinary Officer : W. Dale, M.R.C.V.S.

Health Visitors :—

Superintendent Miss M. D. Lloyd

Deputy Superintendent (M. & C.W.) Miss K. L. Houlton

Deputy Superintendent (School Health) Mrs. B. E. Mackie

Health Visitors : Misses A. Docherty, A. M. Dalton, M. B. Bridges, D. G. Brown, E. C. Harmsworth, D. Jones, J. E. Lusty, A. F. McKenzie, M. Phillpotts, E. M. Stidworthy. Mrs. :— M. K. Dunncliffe, G. Foulsham, M. E. Harris, N. Lever, M. Lewis, J. M. Pye, E. P. P. Talbot, E. Dickenson, J. R. Hayward, J. M. Jelley, E. Gore, M. George, M. Williams, G. M. Mather, P. A. Haden, M. Thomas, V. Turlington, C. Meacham, T. D. Simms.

Tuberculosis Visitors : Mrs. :— C. L. Harper, E. Wolverson.
Misses M. Meer, D. Phipps.

School Health Nurses : Mrs. A. O. Campbell, *E. Ellis, C. Hammond, S. R. Shropshire, L. Wardle, O. A. White (*Has Ministry of Health temporary dispensation to undertake certain health visiting duties).

School Health Nurses Mrs. E. Hale
(with special duties)

Temporary School Nurses	...	Mrs. E. M. Campbell
		Mrs. G. Hunt
		Miss K. Hill
		Mrs. F. Lewis
		Mrs. B. T. Butler
		Mrs. B. Morrisey
Occupational Therapist	... ..	Miss P. M. West

Municipal Midwives :

Non-Medical Supervisor	... ..	Mrs. E. Woodley
Deputy Supervisor	... ..	Mrs. B. Fell

Midwives : Miss D. G. Abell, Mrs. N. Beagrie, Mrs. M. Brivkalns, Mrs. J. Brett, Mrs. E. Caskie, Miss J. Cornthwaite, Mrs. D. M. Cox, Mrs. M. Diaper, Mrs. L. M. Devlin, Mrs. F. Fardon, Mrs. D. Worrall, Mrs. D. C. Jewkes, Mrs. W. Kinsey, Mrs. E. McDowell, Miss P. Norton, Mrs. S. O'Donnell, Miss E. Raine, Mrs. E. Reddick, Mrs. D. Reeves, Mrs. M. Rouse, Mrs. E. Williams, Miss J. Pickett, Miss W. S. Sparkes, Mrs. A. Spragg, Mrs. R. Corbett, Miss D. G. Taylor, Mrs. I. Trasler, Miss M. Inglis, Miss A. Ward, Mrs. E. Wright, Miss D. L. Taylor, Mrs. K. Simmons, Mrs. E. Morley, Mrs. M. Sheehan, Mrs. E. Hurton, Miss J. Marlow, Mrs. T. Wasson.

Day Nurseries :

Supervisor	... ..	Mrs. M. E. Williams
Nursery Matrons :	Miss M. Allan, Mrs. H. A. Arnatt, Miss K. G. Blakemore, Mrs. B. Bruton, Mrs. E. M. Butcher, Mrs. G. Crichton, Miss D. M. Griffiths, Mrs. I. P. Gerard, Mrs. E. T. Young.	
Nursery Staffs	... ..	Nurses—83. Others—38.

Home Nursing Service :

Superintendent	... ..	Miss M. C. Lynch
Assistant Superintendents	... ..	Miss M. Wilkinson Miss K. D. McClure
Nurses.	Full-time 47 (includes 4 male and 4 Queen's nurse students), Part-time 13.	

Home Helps Service : (As from 1st June, 1958 under administrative control of Director of Welfare Services).

Organiser	... ..	Mrs. E. Marshall
Assistants	... ..	Mrs. M. Ball Mrs. D. Buggins Mrs. D. Farris Mrs. P. R. M. Butler

Home Helps 245 (including part-time workers).

*Occupation Centres for Mental Defectives :**Burns Road*

Supervisor	...	...	...	...	Mr. W. Barnes
Deputy Supervisor	...	...	...	...
Assistants	...	...	...	...	Mrs. M. T. Darnell
					Mrs. E. Johnson
					Mrs. M. Dyer
					Mrs. I. Barnes
					Miss E. Williams
Trainee Assistant...	...	...	...	...	Miss V. Chronicle

Yardley Street

Supervisor	...	...	...	...	Mrs. I. Cotterill
Assistants	...	...	...	...	Mrs. E. V. Cowell
					Mrs. M. Larsen

Ambulance Service :

Superintendent	...	...	...	...	F. Warwick
Deputy Superintendent	...	...	...	...	E. Taylor
Control Sub-Officer	...	...	...	...	H. Petherham
Ambulance Personnel. Males—62. Female—12.					
Telephonist—1.					

Blind Welfare : (With new Welfare Committee as from 1st June, 1958).

Home Teachers ... Miss E. Fox, Mrs. M. Gould

Administrative and Clerical Staff :

(General Public Health)

Principal Administrative Assistant	J. H. Grant—Ret. 16/7/58
	F. Ellis—Commenced 17/7/58
Deputy	...
	E. Moore

Senior Section Officers :

Infectious Diseases and Tuberculosis	...	G. Hubbard
Supplies and Enquiries	...	H. Jewison
Maternity and Child Welfare	...	Miss B. M. Sanders
Typing Pool	...	Miss M. E. Goddard
Clinic and Sick Room Appliances	...	Miss J. L. McGregor
M.O.H. Personal Secretary	...	Miss J. Grant—Left 27/6/58
	...	Miss J. Symcox—Commenced 26/7/58

Mental Health :

Duly Authorised Officers	...	Miss F. Holly (Admin.)
		J. A. Sturdy
		Mrs. G. Preston
Accounts	...	K. Liggins
Salaries and Wages and Statistics	...	S. Wardle

Clerks :

Messrs. F. H. Pearson, W. Wakelin, K. Williamson,
 Misses P. E. Brown, M. B. Cunningham, J. M. Gaze, J.
 Hoseason, C. M. Reed, D. M. Ryder, B. L. Smith, W. M.
 Wood, M. O'Connor, V. Murray, P. Baughen.
 Mrs. A. Harrison, M. L. McCaig, W. M. Cartmell, M. M.
 Steele, J. Willacy, V. Simson, D. Evans.

Storekeeper :

Central Stores, Pinley J. C. Brown

Welfare and Pensioners Services :

- | | | |
|---|---|--|
| I. Aged Persons' Homes
(Pensioners Committee). | } | Transferred to new Welfare
Committee as from 1st June,
1958. |
| II. Other Welfare Provisions
(Health Committee). | | |

Pensioners Officer J. H. Ryner, F.C.C.S.,
F.I.S.W.

Deputy Pensioners Officer F. Charlesworth,
A.I.S.W.

Senior Assistant F. M. Riley

Welfare Officer (for handicapped persons) J. R. Gill

Assistant Welfare Officers Mrs. G. C. Downes
R. J. Pickering
J. Wardle
Mrs. F. A. Kelly

Senior Clerk Miss M. Pugh

Clerks Mrs. K. Hulse
T. B. Hopkins
K. R. Davies

Typists Mrs. V. C. Beli
Miss V. H. Knight

Old People's Homes :

Aldermoor Lodge ...Mr. and Mrs. J. Pountley,
Superintendent and Matron

Hawthorn Lodge ...Mr. and Mrs. J. E. Webster,
Superintendent and Matron

Moat House ...Mr. and Mrs. F. Fallon,
Superintendent and Matron

Newlands House ...Mr. and Mrs. G. A. Boston,
Superintendent and Matron

Remembrance House ...Mr. and Mrs. H. C. Watson,
Superintendent and Matron

Stone House ...Mrs. M. Osborn, Matron

Woodway Grange ...Miss B. A. Troughton, Matron

Wyken Lodge ...Mr. and Mrs. G. R. Roberts,
Superintendent and Matron

Temporary Accommodation :

*Block Z.3., Baginton

Fields Hostel ... J. Veveris, Supervisor.

*Flats, 11, London Road

*Use of this accommodation discontinued in April, 1957.

(N.B. Staff of Public Health Inspectorate appears at page 97).

GENERAL STATISTICS

Area in acres	...	...	...	...	19,167
Population (Census, 1951)	...	...	...	...	258,211
Population (estimate for mid-year 1958)	...	...	...	...	281,000
Density of population (1951) (per acre)	...	...	...	...	13.47
Density of population (estimate mid 1958) (per acre)	...	...	...	...	14.66
Number of inhabited dwellings (1931) 42,190 (Dec. 1958)	...	...	...	...	86,400
Average number of persons to each occupied house (mid year)	...	...	...	...	3.25
Rateable value of City (Dec. 1958)	...	...	...	...	£3,979,529
Sum represented by a penny rate (Estimated 1958-59)	...	...	...	...	£16,078
Live Births—					

	<i>Males.</i>	<i>Females.</i>	<i>Totals.</i>
(legitimate)	2,498	2,349	4,847
(illegitimate)	164	153	317

2,662 2,502 5,164 = birth rate of **18.38** per 1,000 population.

Stillbirths 57 53 110 = rate of **21.30** per 1,000 live births

Deaths 1,400 1,086 2,486 — death rate of **8.8** per 1,000 population.

Total Maternal Deaths (none from abortion) = 1.

Maternal Mortality Rate = 0.19 per 1,000 births.

Death rate of infants under one year of age :—

(a) All infants per 1,000 live births 30.2

(b) Legitimate infants per 1,000 legitimate births... 29.7

(c) Illegitimate infants per 1,000 illegitimate births 37.8

Neo-natal Mortality Rate (first four weeks) = 20.5 per 1,000 related live births.

Early Neo-natal Mortality Rate (first week) = 17.4 per 1,000 related live births.

Perinatal Mortality (stillbirths and deaths during first week) = 37.9 per 1,000 total live and stillbirths.

Marriage rate 15.4

*Death rate from principal infectious diseases 0.014

Respiratory death rate 1.00

Phthisis 0.10

Death rate from other forms of tuberculosis 0.004

Death from cancer 1.69

Comparability factor (births) 0.95

Birth rate as adjusted by factor 17.46

Comparability factor (deaths) 1.37

Death rate as adjusted by factor 12.06

* Typhoid, Scarlet Fever, Whooping Cough, Diphtheria, Measles, Diarrhoea under 2 years, Cerebro-Spinal Fever, Poliomyelitis.

MY LORD MAYOR, LADIES AND GENTLEMEN,

I have pleasure in submitting my 12th Annual Report concerning the health of citizens of this city and this of course includes the work undertaken by the Health Department during 1958. The information contained herein also complies with Ministry of Health Circular 22/58.

The number of births registered in Coventry during 1958 was 5,164 (birthrate equals 18·38 per thousand population) and this clearly becomes now the highest number on record in any one year (previous highest : 1957 — 4,925, with a birthrate of 17·76 per thousand population). Once more the population within the city has increased, the Registrar General's Mid-Year estimate for 1958 being 281,000 and this represents an increase of 3,800 over the 1957 figure. The density of population per acre remains at 14·4.

The crude death rate was 8·8 per thousand population (1957 — 8·0, i.e., the lowest on record).

As in 1957, there was only one maternal death during the year under review and the maternal mortality rate was 0·19 per thousand births (1957 — 0·2).

The infantile mortality rate for 1958 was 30·2 per thousand live births and this shows a further increase since the 1957 figure of 28·6 was in excess of that for 1956 at 26·7.

The neo natal mortality was at 20·5 which compares with 19·7 per thousand live births for 1957.

The number of infectious diseases notified during 1958 (i.e., 2,283) was considerably lower than in 1957 (i.e., 8,513), this being almost entirely due to the greatly reduced incidence of measles during the current year (i.e., 1958 — 705 ; 1957 — 6,562). There was a greater incidence of dysentery by about 100 cases (i.e., 1958 — 743 ; 1957 — 645). Tuberculosis (all forms) was down by some 58 cases to 328 (1957 — 386).

Notifications of poliomyelitis showed a welcome decline from 116 in 1957 to 57 in 1958. In this latter connection it is pertinent to report that the pattern of routine sampling and laboratory analyses of water samples from rivers and streams continued throughout 1958 in similar fashion to that described in my 1957 Annual Report, and I am indebted to all departments concerned, whether municipal or otherwise, for their continued interest and assistance in this connection. Meanwhile, vaccination against poliomyelitis has continued within the city. It will be recalled that in November of this year the scheme was extended to include people under the age of 26 years. It is anticipated and hoped that the greater impact of immunisation will come to have its effect in bringing about a persistent reduction in the incidence of this disease : but this too will clearly be dependent upon the future interest of the public, who should continue as a matter of permanent routine to take advantage of the facilities available within the approved age groupings.

It is with regret that I record the notification of three cases of diphtheria during the year (none in 1957), all occurring in patients between 15 and 25 years and none of whom had been immunised. One must continue to stress that if all people in the most susceptible age groups, roughly from birth to 25 years of age, could be immunised, then there is little reason why future cases of diphtheria should arise.

Of latter years, dysentery, though of a mild form, has become a disease of considerable nuisance value and there is a continuing need to exercise the strictest measures of hygiene, particularly in places where large groups of people are meeting, working, or taking their food together day by day. Stringent measures are taken in schools throughout the city to ensure good hygiene, and indeed, groups of young people are particularly vulnerable and most in need of continuing advice in matters of personal hygiene: this is ensured within the school population. Nevertheless, the routine washing of contaminated hands (e.g. following toilet attentions) is a lesson which should be ingrained for young and old alike. It is of extreme importance that those people who are handling food which is for general consumption should take note of these requirements, for by so doing the spread of infection to the public can be brought down to the minimum.

There are indications that the incidence of gonorrhoeal infection within the community and throughout the country is on the increase and one would wish to draw attention to the confidential facilities in respect of treatment which are available at the designated clinic, the Coventry and Warwickshire Hospital, Stoney Stanton Road. Gonorrhoea is an infection which in bygone years caused a great deal of distress, both to adults and babies alike, and there is no longer need for this providing advice and treatment are sought at once.

In this report the Ministry of Health has called for a review of the development of services under the National Health Service Act during the decade since this legislation came into operation in 1948. Detailed comment in this connection will be found under the several appropriate sections of the Act set out in the body of the Report. Nevertheless, a brief tabulated summary of items appears at page 24 and this should prove of interest. This limited review takes no account, of course, of developments in other spheres of departmental interest, such as the inauguration of the country's first Smokeless Zone in Coventry on 31st March, 1951, and the organisation of a Medical Service for municipal superannuation examinations on 10th November, 1952. Moreover, it must be apparent that with the introduction of the National Health Service Act, public demand has increased very considerably for many of the Local Authority's domiciliary services during the decade 1948—1959. This has brought about greatly enhanced visiting in several fields of activity and inevitably a related increase in staff establishments, e.g. Home Nurses, Ambulance personnel, Home Helps, etc. There have been obvious frustrations during the decade under review concerning certain hoped-for developments under the Act and not least in the

field of Health Centre provision when original negotiations to establish a " pilot " Health Centre broke down repeatedly, for one reason or another — quite outside the control of the Local Authority. Nevertheless, the summary (page 27) is imposing, particularly when it is remembered that these new buildings and the development of services were made available within the necessarily circumscribed financial allocations made to the Health Committee from year to year.

The Health Visiting Service has undergone fluctuating difficulties in regard to recruitment since the National Health Service Act came into operation and it must be remembered that while the variety and scope of their work has tended to expand, it has been quite impossible, because of the general shortage of recruits, to bring our approved establishment up to anywhere like full strength. It says much, therefore, for the considerable and efficient work which the Superintendent and her Health Visiting staff have accomplished under these adverse circumstances. I am indebted to my Senior Assistant Medical Officer for Maternity and Child Welfare, Dr. J. M. Done, who has kindly prepared a report dealing with the changing work and scope of the Health Visiting Service, which appears at page 45 and comment is made therein upon the unfortunate wastage of Health Visitors during the year, a situation which was only partially compensated for by the recruitment of a smaller number of students during the preceding year. We were able to recruit a limited number of older women for student training and by this means we came to add three new members to our staff during 1958. It is unfortunate also that some of those Health Visitors who were trained to undertake screening tests for hearing defects in young children came to leave during the year. This meant that those trained staff who are still with us have been obliged to concentrate to a greater extent upon the children with predispositions to hearing defects.

It will be noted that many more homes wherein accidents occurred during the year came to be visited and this is surely a pointer to the greater interest which this facet of preventive work is now so readily receiving. National statistics point to the fact that some 50% of all home accidents are due to falls and that upwards of 85% of these concern elderly people. This factor alone must surely provide fertile ground for research and consideration thereby for such preventive measures as will lead to a reduction in this high incidence.

Particulars of the work accomplished by the Mass Radiography Unit appear at page 22 and I am indebted to Dr. Gordon Evans and his staff for their continued helpfulness and co-operation.

It is with much pleasure that I can record the opening on 11th December, 1958, by the Lord Mayor, Mr. Alderman H. H. K. Winslow, of the General Practitioner Unit at Tile Hill. This accommodation immediately adjoins the Conjoint Maternity and Child Welfare and School Health building previously opened on 5th March, 1957, and although the entire overall range of facilities do not come within the confines of one building as originally conceived, they

do nevertheless complete the first Health Centre to be available in this area, and indeed, so far as I can ascertain, within the adjoining Midlands area. There is every indication in the very brief period since opening that all those who work therein or who attend for advice and treatment are well pleased with the facilities which have been provided and general co-operation prevailing. It is, of course, much too early to make any firm prognostications as to the future since this centre is in fact a pilot venture, but the signs are hopeful and perhaps this arrangement will be a precursor of others to follow in due course in different parts of the city. The general practitioners who have come to accept full-time service in this initial centre have entered into the venture with considerable enthusiasm. Moreover, it is right to record that the Local Authority has gone a very long way indeed in its approach to help overcome the anxieties which many doctors in the area, perhaps not unnaturally, had acquired concerning administration and control, rentals, equipment, staffing and terms of service generally.

It is quite certain that all those who have strong feelings one way or another as to the future of Health Centres will watch developments at Tile Hill with close attention. The experiment will probably take a year or so to settle down and thereafter to allow of rational and considered assessment by all concerned. The opening of a new maternity and child welfare building (to include dental facilities also) is due for mid-1959 at Stoke Aldermoor and steady progress is being made to this end ; this will be the third such major building provided since 1956 (those at Broad Street and Tile Hill respectively preceded).

There has been much commentary throughout the country, both in a wide range of publications and at a number of conferences and discussions, upon the report of the Royal Commission set up to deal with the law relating to mental illness and mental deficiency, which was published in May, 1957. There is every indication that future requirements and the development of services in the field of mental health will be afforded more urgent priority, and it is evident and indeed inevitable that 1959 will come to be recognised as an important year insofar as the replanning and subsequent development of these provisions are concerned.

Work commenced upon the Torrington Avenue site of the new Occupation Centre for 120 adult mentally defective persons in December, 1958, and the work is scheduled for completion in about one year's time and will provide the second modern centre built for this purpose by the local authority in very recent years. This provision will assuredly come to help satisfy an urgent requirement within this city area. One looks forward with great interest to the development of the various provisions anticipated for the Mental Health Service.

I find it necessary once more to draw attention to the urgent need for an extension of Health Education in its widest concept. Appropriate departmental staff engaged in the wide field of Public Health have for long given attention to this extremely important

work, but this is necessarily limited because of their occupation with other essential and routine work. Naturally they will continue to do such Health Education work as is possible, but there is obvious need for an officer on my departmental staff to give persistent attention year by year to arrangements for the dissemination of information concerning varied interests of Health Education. There is a continuing need for concentrating stage by stage upon the various facets of health work, and this would clearly mean, amongst other things, drawing upon a panel of experienced speakers (whether from within the department or by invitation from outside), to propagate information relating to Health Service provisions. I would wish to re-state most definitely that whilst many battles have been won by Health Departments in overcoming a variety of killing or crippling diseases, and while the general health and nutrition of the public have improved beyond measure during immediately past decades, largely due to staggering advances in research and the related application of preventive principles and measures, there remains a continuing necessity to consolidate upon the ground which has been won : otherwise there will be a natural tendency for many people to take things for granted and thereby become lax and complacent. It is in just such fertile conditions that the " enemy " strikes and not infrequently tragedy or extreme distress follows, e.g., diphtheria, poliomyelitis, accidents in the home, food poisoning, etc. Health Education is worthy of greater attention and must not be allowed through lack of finance, equipment and personnel to recede into the background, and indeed, the relatively small outlay in providing these essentials would be more than repaid by the benefits which would be brought to the community at large.

There has been a great deal of press and journalistic comment of latter times — some informed, others less so, upon the subject of " cross infection " in hospitals, and I have thought it appropriate to remark upon this subject at page 76 herein.

In December, 1958 the Health and School Health Services joined forces to prepare a stand in the " Welcome to Citizenship " exhibition in the staff canteen, Bayley Lane. This was an educational project in which all municipal departments took part and was designed to interest young citizens who had come to be included on the voting register. Much interest was shown in the exhibition and many questions were asked concerning the working of the Health Department services. The Public Health Inspectorate, as indeed the City Analyst's Department which has a most direct concern in particular matters of health, also had interesting exhibits.

Many individual health and social problems connected with housing have been dealt with during the year, and I would wish to thank the Housing Department for the consideration which has been shown in the allocation of accommodation and in the transfers arranged for those citizens beset with particular difficulties on grounds of ill health. Many such requirements are of an urgent nature and one appreciates what is achieved in this connection by the Housing Department.

The comments on page 48 of this report indicate the considerable extent to which the District Nursing Service has expanded since the introduction of the National Health Service Act, and underlines the amazing sweep of duties for sick people undertaken by the nursing staff. Not least should there be a general awareness of the considerable demands which modern antibiotic therapy, as also a progressively ageing population, have made upon the nurses during the past decade, and indeed, this will assuredly continue and no doubt increase.

The Ambulance Service too has shown tremendous expansion and progress in the interests of our citizens. Coventry was one of the first two or three Local Authorities to institute radio-telecommunications as between ambulances and depot — this happened in March, 1951. This installation proved an immediate success and has been of inestimable value in producing greater efficiency and availability of the service. Whereas in 1949, the first complete year in which the City Ambulance Service and the Hospital Saturday Fund ambulances (agency arrangement) transported a total of 66,105 patients with associated mileage of 347,011, these figures had increased to 102,112 patients and only 356,614 miles respectively by the end of 1958.

The control of the Welfare Services under Part III of the National Assistance Act passed from the Health and Pensioners' Committees respectively to a new Welfare Committee as from 1st June, 1958, and it is therefore only in respect of the first five months of the year when these services were administered within the Health Department that I would wish, in brief, to comment herein.

There is every justification for the late Pensioners' Committee to feel proud of the additional residential provisions they were able to make for old people during the past decade since the National Assistance Act came into effect. Firstly, Newlands House, Bennetts Road, Keresley (now a "mixed" home) was acquired in 1949 from the National Coal Board and adapted and equipped for 26 residents. In late 1951, Woodway Grange was returned to the Local Authority by the Birmingham Regional Hospital Board and has become a haven for some 24 elderly women. Thereafter, three purpose-built homes came to be built: Hawthorn Lodge in 1953 for 40 mixed residents; Aldermoor Lodge in 1956 for 40 residents, and Remembrance House, Wyken, in 1957, for 42 mixed residents.

It is possible in the light of Ministry of Health Circular 14/57, that greater emphasis will need to be placed upon the admission into old people's homes of a larger number of less ambulant elderly people who may come to need a greater modicum of frank nursing care. The latter course has not been necessary in the past to any great extent because, generally speaking, those residents who have been admitted are reasonably active and not usually in need of prolonged nursing attention. A specific commentary regarding Circular 14/57 follows at page 29.

It is appreciated that, inter alia, forthcoming Mental Health legislation will have great regard to the future care within the com-

munity of elderly people who are mentally afflicted. It seems unlikely, however, that there will be necessity for present accommodation in old people's homes, as such, to be unduly involved by developments in this field of work.

It is true, of course, that there is a dire shortage of hospital beds for the elderly chronic sick, and this is a situation which calls for constant co-operation between the hospital and the local authority in resolving interchange placement problems for a proportion of elderly people. It is understood that the Regional Hospital Board hope eventually to provide more beds for chronic sick cases and this would clearly help to resolve a most difficult problem.

In other spheres of work, and more pertinently relating to the future care of adult handicapped persons, there is particular nostalgia concerning the transference of Blind Welfare administration from the Health Department. The socio-medical care of blind persons has resided within the Health Department since those early days in 1922 following the introduction of the Blind Persons' Act of 1920. Thereafter, in 1946, the department inherited a further extension of their work in this field when the responsibilities previously undertaken by the Coventry Society for the Blind were taken over by the Health Committee. It is therefore opportune for me to thank all those staff in my department who have been so intensely interested in the challenge which this work produced, for their greatly appreciated services. This naturally includes the Teachers of the Blind, and not least Miss E. Fox, who even before she came into the service of the Health Department in 1948, had done such magnificent and dedicated work for blind people in this city. I would also wish to thank the many people in the hospitals, both medical and auxiliary, who co-operated so effectively with my own departmental staff in this sphere of work.

I take this opportunity too of saying how greatly I have enjoyed, as a member of their Executive Committee since September, 1950, being associated with the work of the Coventry and Warwickshire Association for the Deaf (until June, 1954 the Warwickshire Deaf and Dumb Society).

Thanks are also extended to the respective officers of the Association for their very effective liaison and co-operation with my department in the interests of deaf people in this city.

Finally, I should like to thank those members of the present Welfare Department who, as recent members of the Public Health Department, worked so effectively in the various facets of the National Assistance functions to bring greater comfort to a variety of afflicted people, whether through age, handicap or other unfortunate circumstances.

Because of the very great difficulty in reporting in isolation and detail upon five months' working of the National Assistance Act functions while the administration was resident within the Health Department, it is appropriate that the Director of Welfare Services, who took over administrative responsibility for Welfare Services as

from 1st June, 1958, should report in full detail to his Committee upon the overall work undertaken throughout 1958. Details of the work which I have been accustomed to include in the body of this Report dealing with National Assistance Act functions have therefore been excluded (Section 47 excepted).

Concurrent with the transfer of welfare functions from the Health to the new Welfare Committee, the administrative direction of the Home Help Service in Coventry (Section 29, National Health Service Act), passed from the Medical Officer of Health to the Director of Welfare Services, with responsibility to the Health Committee. Comparative assessment of future local medico-social problems appearing in the fieldwork of this domiciliary National Health Service provision will not now therefore come within the purview of the Medical Officer of Health.

I am obliged to the Director of Welfare Services for providing the relevant statistics which appear in this Report (page 80), as also those concerning the Mobile Meals Service (Section 28, National Health Service Act) (Page 75), which latter is now also under his administrative control. Comment upon Section 47 of the National Assistance Act appears at page 91.

I would like to express appreciation to the Organiser, Mrs. E. Marshall, and other staff of the Home Helps Service for the important work accomplished during the past decade.

I would wish to thank the Chief Public Health Inspector for the detailed information he passed to me concerning the work of the Public Health Inspectorate during 1958. It is evident that a great deal has been achieved and not least in the realms of slum clearance in the city area. During 1958 a revision and reorientation of some 28 clearance areas previously declared to the Health Committee was found to be necessary, and a re-submission of 15 amended areas came to be approved by the Committee in their place. Details of this important work, which continues to operate alongside the city's plans for general reconstruction, are available at pages 108—110 herein and should be of interest to all who wish to acquire helpful information concerning this field of work and progress.

The number of dwellings indicated as being overcrowded at the end of the year (page 96) relates only to those known to the Public Health Inspectorate, but it is envisaged that many more may well come to light when a house-to-house survey which is intended for the future begins.

The number of dwellings inspected for housing defects (page 110) was down by some 143 in 1958, but at the same time, it was necessary for 1,876 more visits to be made by the Inspectorate in this connection. The number of rehousing applications on the revised waiting list at 31st December was at 4,178 (1957 = 5,152) and the number of families rehoused was 1,564 (1957 = 1,808). It is of much significance that every animal carcass passing through the City abattoir is examined by the meat inspectors and clearly this is an achievement giving justifiable satisfaction and an ideal always to be aimed at.

I am not a member of the Warwickshire Clean Air Council and I am unable therefore to speak of its work from direct personal experience. But having now been able to read the commentary of the Chief Public Health Inspector which appears hereinafter (pages 119—124) it is evident that the implications of this organisation's work are of great importance within the County and not least in this great industrial City of Coventry.

Although it is now some time since the institution by the City Council of the country's first Smokeless Zone (February, 1951), it is certain that the impact of this measure made its niche and assisted in some degree at least in triggering off a mounting national awareness of the dangers inherent from polluted atmosphere.

The introduction of the Clean Air Act, 1956, is of great significance for this provides a generalised opportunity to progress much further. Any measure which makes contribution towards a cleansing of the atmosphere not merely helps to preserve the aesthetic appearance of buildings and other physical amenities, but also has beneficial effect upon agricultural production and, most important of all, improves directly the general health of the community. The medical implications of polluted air are only too apparent because the irritant content contributes appreciably to acute and chronic naso-pharyngeal and respiratory diseases and has its untoward impact in causing ill-health for many people. The possible effect too which a continually polluted atmosphere may have in the initiation of cellular change to produce a proportion of the total lung cancer cases must not be lost sight of. The Coventry Health Inspectorate is to be congratulated not only on its share of the present work in this field but also for pioneering efforts accomplished in those earlier days.

It would be inappropriate for me to conclude this Report without expressing my thanks to many colleagues in other departments for their helpfulness and co-operation throughout the year and this I do gladly. At the end of a decade since the National Health Service provisions came into effect, I think it apt to record appreciation to the City Architect and his staff, and not least to Mr. W. G. Sealey, for their assistance to my department. It may be recalled that Mr. Sealey came to Coventry with the specific task of dealing, architecturally, with the considerable Health Centre programme envisaged for the city at that time. It is paradoxical that subsequent events have largely negated such progress and that relatively little satisfaction has been gained in this direction. Mr. Sealey's talents have nevertheless had a fair degree of scope in other Health Department activities and I am grateful to him for his ready co-operation at all times. I wish also to acknowledge the assistance given by Mr. J. Brown of the same Department in the new cover design of this present Report. Acknowledgement is made to the City Engineer for the larger photographic illustration on frontispiece—(the two smaller are by *Coventry Evening Telegraph*)—and for others appearing on pages 35, 36, 40, 41, 44, 49 and 81. I am also obliged to the City Architect for the plan illustration on page 32.

The Principal Administrative Assistant for the Health Department, Mr. J. H. Grant, retired on 16th July, 1958, after 41 years' service with this Corporation. Until July 1948 he was Chief Clerk, but with the impact of the National Health Service Act and the related development of departmental services following a comprehensive re-organisation in early 1948, his post was appropriately re-designated. Mr. Grant saw many changes of a varied nature come about within the department during his long period of service and it is certain that he will carry into his retirement a rich mixture of memories. I wish him a happy retirement and many years of good health for him and his wife. Mr. F. Ellis, previously Deputy Principal Administrative Assistant, was appointed as Mr. Grant's successor and I wish him every happiness in his forthcoming work. Miss J. Grant took up a secretarial and teaching appointment in Nigeria during the year after ten years in the department. I wish to express thanks to her for valued helpfulness, most particularly during the past three years when she was my personal secretary.

It is with great pleasure that I thank and commend all members of my staff for their assiduous attention to the various aspects of the department's work and for the interest they have shown during a difficult year when there has been much to cause distraction. I wish also to express my appreciation to those of my staff who have in any way helped with the preparation of this Report.

In conclusion, may I on behalf of my staff and myself, thank the respective Chairmen and members of the Health and late Pensioners' Committees for their interest in the work of the department throughout the year.

I am, my Lord Mayor, Ladies and Gentlemen,

Your Obedient Servant,

The. Clayton

MEDICAL OFFICER OF HEALTH.

Health Department,
Council Offices,
Earl Street (South Side),
COVENTRY.
(Tel. : Coventry 25555).

Population.

The Registrar General's estimated population for mid-1958 was 281,000, which was an increase from the 1957 mid-year figure of 277,300. The generally upward trend of the city's population for the past twenty years is shown in the table of vital statistics on page 167.

Birth Rate.

The births registered as Coventry births during the year numbered 5,164 giving a birth rate of 18.38 per 1,000 population. These figures compare with 4,925 births in 1957 and a birth rate of 17.76 for the same year. Further details relating to births occurring within the city are given elsewhere under the heading of "Midwifery."

The comparable figure for England and Wales was 16.4 per 1,000 population.

General Death Rate.

The number of deaths recorded as belonging to the city during the year was 2,486, which gives a crude death rate of 8.8 per 1,000 population. This compares with a death rate for England and Wales of 11.7. The major causes of death during the year under review continue to be heart disease and other vascular conditions ; cancer ; respiratory conditions and tuberculosis. An analysis of the various causes of death is given in the appropriate table on page 166. It is noted that 61.2 per cent of the total deaths registered occurred in persons over 65 years of age.

Infantile Mortality.

The number of deaths of infants under 1 year of age during 1958 was 156, giving an infant mortality rate of 30.2 per 1,000 live births.

The infantile mortality for England and Wales was 22.5 per 1,000 births.

Neo-Natal Mortality.

The number of deaths of infants under 4 weeks of age during 1958 was 106, giving a neo-natal mortality rate of 20.5 per 1,000 live births. The comparable neo-natal mortality rate of 1957 was 19.7 per 1,000 births.

Marriage Rate.

The number of marriages solemnised in the city during the year was 2,161, giving a marriage rate (i.e., number of persons married) of 15.4 per 1,000 population. (This compares with 15.3 per 1,000 population for the preceding year).

Maternal Mortality.

The maternal mortality rate for the city was 0.19 per 1,000 total births and this compares with 0.20 for the preceding year. The comparative figure for England and Wales was 0.43.

Infectious Diseases.

The following notifications in respect of infectious diseases were received into the department during 1958, and it should be noted that the comparative figures in brackets are those for 1957 and for the last complete pre-war year, 1938, in that order. In the last mentioned year measles and whooping cough were not notifiable.

Diphtheria 3 (0 : 212) ; Scarlet fever 160 (90 : 406) ; measles 705 (6,562 : —) ; whooping cough 81 (383 : —) ; acute primary pneumonia 93 (115 : 290) ; puerperal pyrexia 57 (57 : 54) ; meningococcal infections 5 (16 : 36) ; Acute anterior poliomyelitis (paralytic) — (7 : 2) ; acute anterior poliomyelitis (non paralytic) — (45 — —) ; ophthalmia neonatorum 5 (5 : 16) ; erysipelas 25 (31 : 60) ; malaria — (2 : —) ; dysentery 743 (645 : 15) ; acute influenzal pneumonia 39 (71 : 56) ; acute encephalitis 3 (5 : —) ; food poisoning 33 (29 : —) ; typhoid fever 1 (— : —) ; paratyphoid fever 1 (0 : —).

The total incidence of notifiable infectious diseases was less than during 1957 (i.e., 1,954 : 8,063) due mainly to the decrease in the notifications of measles.

Concerning diphtheria, the following figures continue to tell their story, and, incidentally, that concerned with the campaign of immunisation against the disease in Coventry :—

1945—	146 cases (5 deaths—none immunised)
1946—	115 cases (4 deaths—none immunised)
1947—	53 cases (2 deaths—nine immunised)
1948—	12 cases (no deaths)
1949—	12 cases (2 deaths—none immunised)
1950—	7 cases (2 deaths—none immunised)
1951—	4 cases (no deaths)
1952—	2 cases (no deaths)
1953—	0 cases
1954—	0 cases
1955—	6 cases (1 death)—none of the six immunised
1956—	0 cases
1957—	0 cases
1958—	3 cases (no deaths)—one immunised.

The figures relating to diphtheria, scarlet fever, dysentery, food poisoning, typhoid and paratyphoid all show an increase, whilst measles, whooping cough, acute primary pneumonia, meningococcal infection, paralytic and non-paralytic poliomyelitis, erysipelas, malaria, acute influenzal pneumonia, acute encephalitis show a decrease. Puerperal pyrexia and ophthalmia neonatorum notifications remain unchanged.

Incidence of Poliomyelitis in the City during 1958.

It is a pleasure to record that there were no cases of poliomyelitis notified during 1958 following upon the high incidence of the disease (114 cases) in the city during 1957. It is hoped that the accelerating programme of immunisation in the approved groups is in some

considerable measure responsible for the present encouraging situation. 1953 was the year of greatest incidence of poliomyelitis in Coventry (164 cases).

Scabies.

There were 40 patients treated for scabies at the Cleansing Centre, Gulson Road Clinic during the year and this is some 10 persons less than in 1957.

The Centre is open daily for women and children from 9.30 a.m. to 4.30 p.m. and for men four evenings per week.

The work of the unit was as follows :—

	No. of patients	No. of treatments
Scabies		
Male Adults	9	18
Female Adults	14	28
School Children ..	14	28
Children under 5 years	3	6
Total	40	80

Cleansing.

Male	...	...	...	...	...	...	7
Female	...	...	...	...	...	...	—

VENEREAL DISEASES

The treatment centre is organised at the Coventry and Warwickshire Hospital under the control of the Hospital Management Committee. The returns supplied to me are as follows :—

New cases in 1958 707 (697 in 1957)

Of the 707 cases seen for the first time no less than 510 proved on investigation to be non-venereal.

TUBERCULOSIS

As a result of the National Health Service Act the Warwickshire and Coventry Joint Committee for Tuberculosis, which was formed in March 1914, passed out of existence after a long period of useful and commendable service. The sanatorium at Hertford Hill and various dispensaries throughout the county passed to the administration of the Birmingham Regional Hospital Board and the previously close links between the local authority and the sanatorium ceased after some twentyfive years. The ancillary domiciliary

functions, such as the supply and maintenance of shelters and the provision of extras for domiciled tuberculous patients were taken over by the Health Department.

In the past ten years 4,023 cases of pulmonary tuberculosis and 465 cases of non-pulmonary tuberculosis were notified or re-notified in the city. These figures include 319 pulmonary and 48 non-pulmonary cases notified during the year 1958.

It is of much interest to observe that the number of cases of pulmonary tuberculosis notified in 1958 was the lowest for the last ten years. This is of particular moment when it is realised that the estimated mid-year population of the city rose from 254,900 in 1949 to 281,000 in 1958.

During the period under review and in order markedly to reduce the waiting list, arrangements were made to send Coventry patients to hospitals and sanatoria other than Hertford Hill, and regular visiting by near relatives to those patients in distant sanatoria was made possible by financial assistance from the department. Some Coventry patients are admitted to St. Wulstan's at Malvern and Creaton Hospital at Northampton, as well as to Hertford Hill Sanatorium. Waiting periods for the entry of patients into these hospitals is quite negligible. Moreover arrangements are in operation for sending certain people suffering from long standing chronic tuberculosis to have a few weeks' recuperative convalescence at a home functioning for that purpose on the Northumbrian coast.

Mass Radiography.

Throughout the last ten years there has always been forthcoming the greatest co-operation and helpfulness from Dr. A. Gordon Evans the Director of the Mass Radiography Unit and his staff and for this I am much indebted. 214,660 Coventry residents have been x-rayed. which speaks highly for the activities of that unit.

REPORT OF WORK OF MASS RADIOGRAPHY IN COVENTRY.

Year ended 31st December, 1958.

24,670 Coventry residents were X-rayed during the year, some 5,000 less than during 1957. 72 (0.29%) newly discovered tuberculous conditions and 55 (0.22%) non-tuberculous conditions were referred to the Chest Clinic or Hospital for further investigation. 33 (0.13%) of the tuberculous cases have since been notified. There is a further slight fall in the percentage of notified cases of pulmonary tuberculosis; the figure for 1957 being 0.15%.

The following tables give the break-down into main group headings of the total number x-rayed. Table 1 shows details of tuberculous abnormalities and Table 2 the non-tuberculous abnormalities.

Table 1

New cases of pulmonary tuberculosis discovered and referred to the Chest Clinic.

GROUP.	Number X-rayed.	Total number referred	Percentage of total X-rayed	Total number referred and final assessment			
				Number notified	Percentage of total X-rayed	Not notified but requir- ing occas- ional out- patient supervision	Inactive tuberculous lesion not requiring supervision
Organised groups (Industry, offices etc.)	16,190	46	0·28	22	0·14	18	6
General Public ..	7,300	20	0·27	8	0·11	12	—
Ante-natal Patients	500	1	0·20	—	—	1	—
School Children	680	5	0·73	3	0·44	2	—
TOTALS ..	24,670	72	0·29	33	0·13	33	6

Table 2

New non-tuberculous abnormalities discovered and referred Chest Clinic or Hospital.

GROUP	Total Number X-rayed	Total number referred and final assessment										
		Number referred to Chest Clinic or Hospital	Percentage of total X-rayed	Bronchial carcinoma	Non-malignant growths.	Cardiac abnormalities	Pneumokoniosis	Inflammatory conditions.	Bronchitis and Emphysema.	Bronchiectasis.	Abnormalities of the Diaphragm.	Miscellaneous chest conditions.
Organised groups Industry, offices	16,190	34	0·21	4	2	2	4	8	7	2	—	5
General Public..	7,300	21	0·29	—	3	1	—	6	2	1	6	2
Ante-natal Pat- ients	500	—	—	—	—	—	—	—	—	—	—	—
School Children	680	—	—	—	—	—	—	—	—	—	—	—
	24,670	55	0·22	4	5	3	4	14	9	3	6	7

- GROUP 1. (Organised Surveys). The incidence of both tuberculous and non-tuberculous abnormalities discovered in this group of examinees is practically the same as was found in 1957. For several years prior to this there had been a steady decline in the incidence of pulmonary tuberculosis.
- GROUP 2. (General Public). Only a very small number of the general public was x-rayed during 1957 so that no comparison is possible. It is interesting that compared with Group 1 the incidence of tuberculosis is lower but the incidence of non-tuberculous abnormalities is higher. This may be due to the fact that the general public group contains a much higher proportion of female examinees, particularly in the higher age groups.
- GROUP 3. (Ante-natal). It is pleasing to note that there are no significant tuberculous or non-tuberculous abnormalities in this group.
- GROUP 4. (School Children). During 1958 only the Mantoux positive children were x-rayed. 3 active cases of pulmonary tuberculosis were discovered. This does seem to indicate that x-ray facilities should be available for this group, or at least the strong positive reactors to the Mantoux test.

THE FIRST TEN YEARS OF THE NATIONAL HEALTH SERVICE.

In a Special Survey pp. 54 et seq. of my Annual Health Report for 1952, I reported in accordance with Ministry of Health Circular 29/52 upon the "Local Health Services Provided Under the National Health Service Act by the Local Health Authority."

Necessary reference can be made to the above survey under the respective headings given in that Report, so that it is unnecessary to repeat herein the more detailed information provided at that time. I propose, therefore, to indicate under similar headings to those given in 1952 any changes which have taken place, or anything new which is of note and which has had impact upon the Health Services up to 31st December, 1958.

1. **Administration :** The statements concerning the Committee constitution in relation to National Health Service matters remain the same. The responsibility of the Medical Officer of Health to the Health Committee for the various services mentioned has not changed, except that the Director of Welfare Services was made directly responsible to that Committee for the Home Help Service (Section 29) and for the Meals on Wheels Service (Section 28) as from 1st June, 1958.

2. **Co-ordination and co-operation with other parts of the National Health Service :** the Medical Officer of Health is now also a member of the Local Hospital's Cross Infection Committee. The co-operation of Health Visitors is now extended with the hospital staff, who take account of all patients suffering from accidents sustained in the home and who are brought into hospital for treatment. Co-operation is also good between the Home Nursing and Midwifery Services, and the local hospitals and General Practitioners. With regard to Mental Health in general, there are close links between the Local Authority's Mental Health staff and the staff of the Central Hospital. It would be of decided advantage, however, if the Medical Officer of Health was either a member of the Group 14 : Hospital Management Committee or co-opted on to the House Committee of the Central Hospital, and indeed, the same type of arrangement would be of mutual assistance in relation to the Hertford Hill Sanatorium, since in both hospitals a considerable number of Coventry cases are involved.

3. **Joint use of Staff :** Comments of 1952 apply, but with the following amendments :

The Special " Contact (Tuberculosis) Clinic " at Gulson Road may shortly be moved to the Chest Clinic since this has now become better staffed and positioned to cope with these duties. There is a tendency for the Health Visiting Service to be in closer liaison with General Practitioners and this has applied particularly in the Tile Hill area since the Medical Practitioner Unit of the now completed Health Centre came into use.

4. **Voluntary Organisations :** The Coventry Corporation's Ambulance Service is a directly provided and unified service, but for the time being continues to rent its present quarters from the voluntary " Hospital Saturday Fund." St. Faith's Shelter arrangements continue as heretofore.
5. **Care of Expectant and Nursing Mothers (Section 22) :** X-ray requirements continue for antenatal cases but this only where really necessary because of the possible implications from undue radiation hazards.

The appalling dearth of Dental Officers in the Municipal Dental Service continues and thereby the equally appalling numerical insufficiency of preventive dental treatments proceeds also.

6. **Domiciliary Midwifery (Section 23) :** Gas and Air machines are being replaced to some extent by Trilene apparatus and at the time of writing there are 14 Trilene sets available.

It will be recalled that on pages 24 and 25 of my 1957 Annual Report, comments were made concerning " Ante-natal care relating to Toxaemia of Pregnancy." This followed upon a meeting with Consultants and General Practitioner representatives and gives a further indication of the co-operation

already existing. Indeed, the co-operation between the Local Authority staff and that of the Hospitals and General Practitioners is most satisfactory, but there is clearly an inadequate number of hospital beds available for Coventry cases and this throws additional stress upon Midwives, and obviously, greater financial responsibility upon the Local Authority. No doubt the recommendations of the Cranbrook Committee's Report, if eventually they come to be implemented, may have some effect in redressing this situation.

7. **Health Visiting (Section 24) :** Co-operation as stated under 2. above. There is still a shortage of qualified Health Visiting staff which has adverse effect upon the requirements of the public.
8. **Home Nursing (Section 25) :** Pattern is same as in 1952 but scope has increased.
9. **Vaccination and Immunisation (Section 26) :** There was increasing activity in poliomyelitis immunisation during the latter part of 1958. Full co-operation exists between General Practitioners and the Health Department staff in the full field of immunisation and vaccination work.
10. **Ambulance Service (Section 27) :** There continues to be full co-operation as between the Ambulance Service, Hospitals and General Practitioners in the use of this Service. There is clearly little evidence now of the Service being abused from the operational point of view as was the case to some extent in the first year or two after the National Health Service Act came into effect.
11. **Prevention of Illness, Care and After-Care (Section 28) :** Comments made in my 1952 Report under the various sub-paragraphs still apply in general, but clearly the details have varied in degree or execution according to particular needs of the public during the past six years.
12. **Mental Health (Section 57) :** Here again the general pattern of facilities explained in the 1952 Report has continued. By the end of 1958 the building of a new Adult Training Centre for 120 mentally defective persons had commenced. Such a provision will clearly call for extended co-operation by all concerned, whether Local Authority, Hospitals or General Practitioners, in the interests of all those persons who are to be looked after there.

NATIONAL HEALTH SERVICE ACT 1948-1958

The following "diary" is not complete, but it does give some idea of material progress in many directions in Coventry during the decade under review :—

1948 Preparation of schemes under Sections 22 to 29 and also 51 of the National Health Service Act.

Re-organisation of Health Department staff to undertake the above work (as also that under the National Assistance Act).

Direct provision of Home Nursing Service transferred from voluntary organisation.

City Ambulance Depot transferred from Abbots Lane to premises of Hospital Saturday Fund (Section 27) — temporary, part agency arrangements.

1949 8, Park Road, approved as key Training Home for District Nurses (Section 25).

"Meals on Wheels" Service provided by Local Health Authority on 25th July, for up to 100 meals daily (Section 28, National Health Service Act).

Health Visiting Follow-up of Accidents occurring in the Home instituted (Sections 24 and 28).

1950 "Contact Clinic" for child contacts of tuberculous persons instituted at Gulson Road Clinic (Section 28).

Extensions to Queen Phillipa Day Nursery — 15 additional places (Section 22).

Opening of Sessional Maternity and Child Welfare Clinic, Whoberley (Section 22).

1951 Ambulance Service : Radio-telecommunications service installed. (Section 27).

Building commenced on Monks Park Day Nursery. (Section 22).

1952 Maternity and Child Welfare Sessional Clinic, Bell Green Community Centre (Section 22).

Opening of Burns Road Occupation Centre (for 60 mentally handicapped). (Section 51).

1953 Pilot Scheme commenced in Cheylesmore area for initial amalgamation of Maternity and Child Welfare and School Health Medical and Nursing Services (1st January).

Monks Park Day Nursery opened January. (Section 22).

1954 Extension of "Amalgamation Scheme."

Sessional Maternity and Child Welfare Clinic opened, Windmill Road. (Section 22).

Broad Street Joint Maternity and Child Welfare and School Health Clinic in advanced state of building. (Section 22).

B.C.G. Vaccination arrangements approved (7th February, 1954) by Ministry of Health (Section 28).

1955 Papenham Green Day Nursery opened, April 13th (Section 22).
"Amalgamation Scheme" completed for Medical and Nursing Staff.

Broad Street Joint Maternity and Child Welfare and School Health Clinic opened (Section 22).

Opening of a Sessional Maternity and Child Welfare Clinic at St. Barbara's Church Hall, Earlsdon. (Section 22).

Partial decentralisation of Home Helps Service to Bell Green and Holbrooks areas respectively (Section 29).

1956 Occupational Therapy Service commenced for domiciliary tuberculous patients (Section 28).

Tile Hill Joint Maternity and Child Welfare and School Health Clinic opened (Section 22).

Poliomyelitis Immunisation Scheme started in Coventry. (Section 26).

Introduction of 2 weeks' Training Course for Trainee Home Helps. (Section 29).

Sessional Maternity and Child Welfare Clinic, Willenhall, opened. (Section 22).

1957 Ad hoc transport provision, Home Nursing Service (Section 25).

Extension of further decentralisation plans envisaged for Home Helps to Wyken and Tile Hill (Section 29).

Opening of Yardley Street Occupation Centre. (Section 51).

Anti-Poliomyelitis Immunisation Scheme continued in line with available supplies of vaccine. (Section 26).

Health and Welfare Services Handbook prepared and issued in conjunction with Public Relations Department.

1958 General Practitioner Suites opened to complete Tile Hill Health Centre project (Section 21).

Stoke Aldermoor Maternity and Child Welfare Clinic — building commenced.

Torrington Avenue Adult Training Centre (120 places) — building commenced December. (Section 51).

LOCAL AUTHORITY SERVICES FOR THE ELDERLY SICK AND INFIRM

Ministry of Health Circular 14/57

In this Report the Ministry of Health have requested information of any special ways evolved to strengthen the domiciliary Health Service (including the Home Help Service), provided for the elderly sick and infirm, consequent upon the above circular.

Under Para. 2 (i) **Medical** : For minor ailments most elderly people in this Local Authority's Homes voluntarily opt for the services of one general practitioner to attend them under the National Health Service provisions. A relatively few opt to have the particular general practitioners to whom they have always been accustomed. **Nursing** : Six out of eight Old People's Homes have full-time Nurse/Housekeepers of either S.R.N. or S.E.A.N. status who provide routine nursing attention. In the other two Homes the routine nursing care is given by the Housekeepers, but Home Nurses attend to give specialised nursing attention.

There is a good medical relationship between Homes and Hospitals for transference of the elderly, and wherever possible, this occurs on an exchange basis. In the case of serious illness, there is no real difficulty in obtaining hospital beds.

(ii) **Care of the Infirm** : There is a tendency for more non-ambulant elderly people to be given necessary treatment in bed in our Old People's Homes. The number of ground floor beds is progressively increasing (Number now available = 132 out of a total of 285). Dressing and toilet assistance is given and there are an adequate number of commodes. Sanichairs are gradually being introduced. There is an increasing proportion of wheelchair cases catered for (14 at present).

(iii) Nursing care is given in the Homes to a number of cases throughout terminal illnesses whenever this is not placing excessive strain upon staff. Otherwise necessary arrangements for the hospitals to undertake such care are made. In 1958 there were 24 deaths — the majority of whom were nursed in Old People's Homes throughout terminal illness.

Para 3. There is no question of Old People's Homes taking on the appearance of old " infirmary wards".

Para. 6. More ground floor accommodation is gradually becoming available : ground floor beds at present in Old People's Homes number 132 (first floor : 153). It is the intention in any future Old People's Homes to have lifts, thereby giving an extra equivalent of "ground floor accommodation." Any extensions to existing Homes would take into account the need for additional ground floor beds.

Para. 7. It is felt that Part III accommodation difficulties do not present any unduly serious problems in this City.

Para. 9. No difficulties are experienced in the transference of elderly people to or from the Old People's Homes and Hospitals.

Para. 10. The elderly and infirm are visited in their own homes. Home Nursing attention is available. The Home Help Service and Meals on Wheels are provided, and in the latter case some 500/600 meals are made available per week.

Para. 11. A proportion of old people are taken into Old People's Homes for brief periods in order to give relatives a change and holiday break, and also to give the old people themselves a change of environment and routine.

Para. 12. Home visitors provide reports upon home circumstances : because of limited Health Visiting staff it has not been possible as yet to allocate a particular Health Visitor to a hospital as liaison for geriatric purposes.

The Home Help Service has been progressively extended, and at 5th November, 1957, staff were supplemented by some 88 additional part-time Home Helps. Decentralisation of the Service too has taken place and this has been to the advantage of the elderly and infirm. Peripheral offices were opened as follows :—

Bell Green :	1955
Holbrooks :	1956
Tile Hill :	1958

Para. 13. The Superintendent of Home Nurses is informed by the hospitals of cases discharged which require home nursing care. Home Nurses have extended their assistance to general practitioners by a considerable increase in injection therapy. They also provide service in co-operation with the hospital psychiatrist at Gulson Road Clinic for E.C.T. sessions. The Medical Officer of Health is notified to some extent by the hospitals concerning the discharge of patients, but it is felt that there is room for further extension of information in this connection.

Para. 17. There is a very active voluntary organisation which helps elderly people in many ways within their own homes.

Para. 18. The Housing Department gives particular attention to the housing needs of very many old people.

NATIONAL HEALTH SERVICE ACT, 1946

In the following pages I have dealt with the services which come within the terms of the National Health Service Act, in the following order :—

- Section 21. Health Centres.
- „ 22. Care of Mothers and Young Children.
- „ 23. Midwifery.
- „ 24. Health Visitors.
- „ 25. Home Nursing.
- „ 26. Vaccination and Immunisation.
- „ 27. Ambulance Service.
- „ 28. Prevention of Illness, Care and After Care.
- „ 29. Domestic Help.
- „ 31. Mental Health.

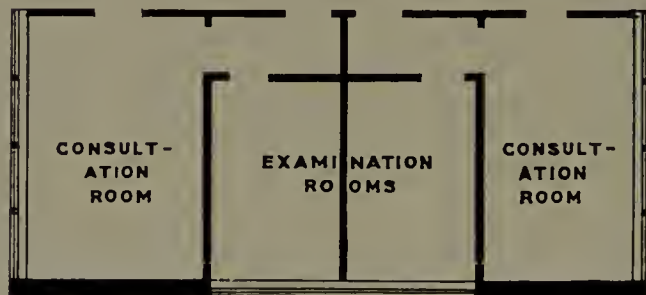
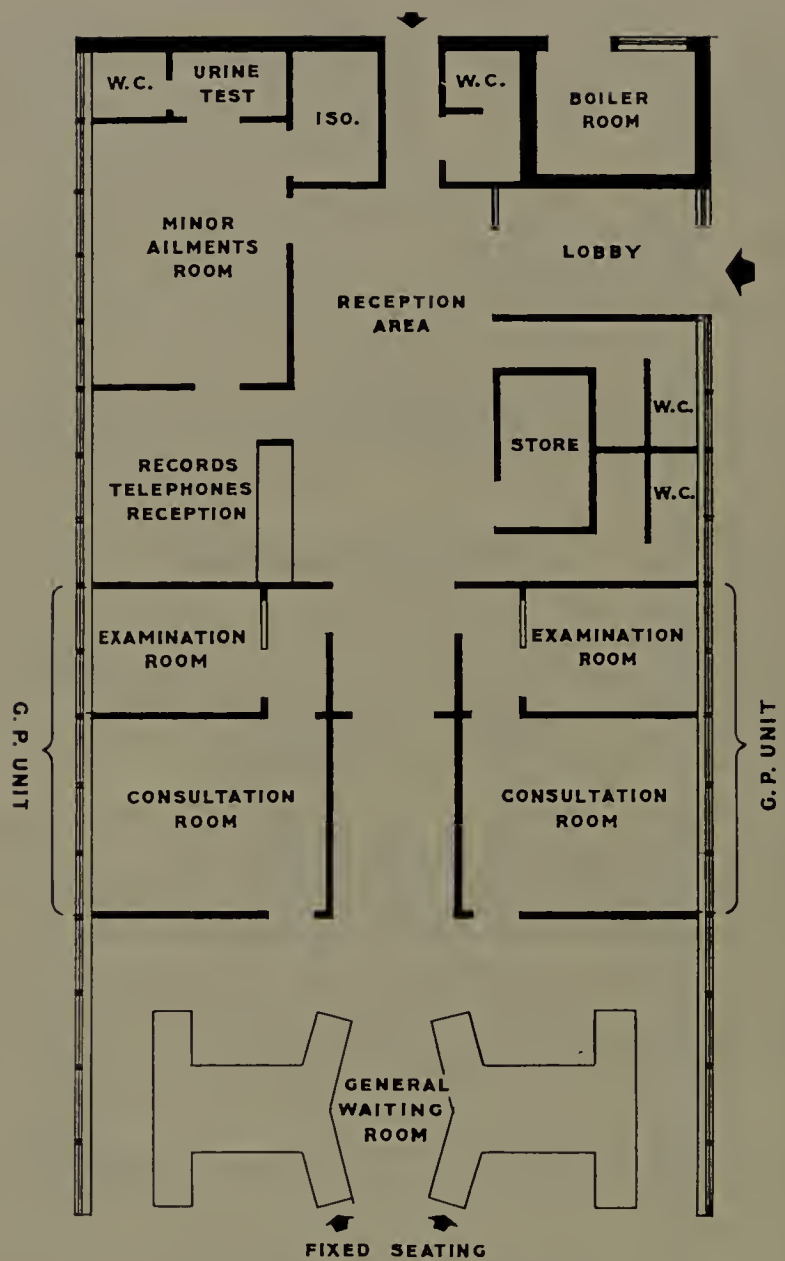
HEALTH CENTRES

Section 21.

In accordance with Section 21 of the National Health Service Act, it shall be the duty of every Local Health Authority to provide and maintain to the satisfaction of the Minister premises which shall be available for all or any of the following purposes :—

- (a) For the provision of general medical services, under Part IV of this Act by medical practitioners.
- (b) For the provision of general dental services under Part IV of this Act by dental practitioners.
- (c) For the provision of pharmaceutical services under Part IV of this Act by registered pharmacists.
- (d) For the provision or organisation of any of the services which the Local Health Authority are required or empowered to provide.
- (e) For the provision of the services of specialists or other services provided for out-patients under Part III of this Act.
- (f) For the exercise of the powers conferred on the Local Health Authority by Section 179 of the Public Health Act, 1936, or Section 298 of the Public Health (London) Act, 1936, for the publication of information on questions related to health or disease and for the delivery of lectures and for the display of pictures or cinematograph films in which questions are dealt with.

I have made reference to the opening of the general practitioner accommodation at Tile Hill in the preamble to this Annual Report and this building completes the fuller concept of a health centre since it was built upon a pre-selected site immediately adjoining the combined maternity and child welfare and school health building which latter was opened on 15th March, 1957.



1 0 1 2 3 4 5 6 7 8 9 10 FEET

The General Practitioners' Accommodation.
Plan—Tile Hill Health Centre.

The general practitioner unit comprises a single storey building with four distinct suites each having separate consultation and examination room and equipped with modern desk and chairs and having also examination couches, general and angle-poised lights and wash basins (see frontispiece).

There is a pleasant general waiting room, common to all suites, facing onto a garden aspect and having comfortable seating for patients. The remaining part of the building has an entrance hall and reception area, a records room with reception counter and telephone switchboard. There is a minor ailments room with necessary furniture, cupboards and medical equipment, also toilet annexes. (See Plan—opposite).

The general practitioner suites are in full time usage and the doctors concerned have their practices (for much the greater part) in the Tile Hill area. Two of the suites are in full time use by three doctors in one practice ; one suite likewise for a practice having two doctors and the remaining suite is for a single practising doctor. A further group of five doctors has the use of one suite on one afternoon per week for ante-natal purposes. The accommodation is rented to the Local Executive Council by the Local Authority and the general practitioners practising in the centre are under contract of rental with the former body. The building is open from 9 a.m. to 9 p.m. every day except Sunday and it is also staffed by a rota of three part-time nurses operating singly on four hourly shifts and also in the same manner by a rota of three part-time clerk/receptionists. Certain facilities within the combined maternity and child welfare and school health clinic (e.g., ultra-violet light) are available also for such child patients as are recommended by their doctors.

CARE OF MOTHERS AND YOUNG CHILDREN

Section 22

Child Welfare Clinics.

There were at the end of 1958 under the control of the department 19 different premises where clinics providing services for the welfare of mothers and children were being held. In the permanent clinics the aim is to have daily (and in one instance twice daily) sessions for particular purposes.

In the 20 clinics there are—

- 28 sessions for infant welfare
- 9 sessions for toddlers
- 2 sessions for B.C.G.

39

Additionally there are—

- 10 ante-natal sessions
- 2 special women's sessions
- 1 paediatric session

MATERNITY AND CHILD WELFARE CLINICS

Welfare Centre	Type of Premises	Daily Sessions					Infant Welfare.	Toddlers.	B.C.G.	Ante-Natal	Post-Natal	Women's Special	Paediatric	Ultra-Violet Light.
		Mon.	Tue.	Wed.	Thur.	Fri.								
Gulson Road	Permanent Clinic	1	2	1	2	3	2	1	1	2	—	1	1	2
Whitley	Rented Church Hall	—	1	—	—	—	—	—	—	—	—	—	—	—
Broad Street	Permanent Clinic	1	1	2	2	1	2	2	—	1	—	—	—	—
Bell Green	Rented Hall,	—	—	—	—	—	2	—	—	1	—	—	—	—
	Community Centre	—	2	—	1	—	2	—	—	—	—	—	—	—
Pinley	Rented Hall,	—	—	—	—	—	—	—	—	—	—	—	—	—
	Community Centre	—	—	1	—	—	1	—	—	—	—	—	—	—
Canley	Rented ex-hostel	1	1	1	1	—	1	1	—	1	—	—	—	—
Cheytesmore	" ex-hostel	—	1	1	1	—	2	1	—	—	—	—	—	—
Green Lane	" Church Hall	—	—	—	—	1	1	—	—	—	—	—	—	—
Holyhead Road	(Dance) Hall Rented	—	—	2	—	1	2	1	—	1	—	—	—	—
Windmill Road	Rented School Clinic	—	—	—	1	1	1	—	—	—	—	—	—	—
Poole Road	Part of Day Nursery	—	1	1	1	2	2	—	—	1	—	—	—	—
Stratford Street	Rented Church Hall	—	1	—	—	—	1	—	—	—	—	—	—	—
Holbrooks	Rented Hall,	—	—	—	—	—	—	—	—	—	—	—	—	—
	Community Centre	1	—	—	—	—	1	—	—	—	—	—	—	—
Wyken	" Church Hall	1	—	—	—	1	1	—	—	1	—	—	—	—
Whoberley	" ex-hostel	—	—	1	—	—	1	—	—	—	—	—	—	—
Tile Hill	Permanent Clinic	—	1	1	1	1	2	1	—	—	—	—	—	2
Willenhall	Rented Flats (2)	1	—	—	—	—	2	1	—	—	—	—	—	—
Earlsdon	" Church Hall	—	—	—	—	1	1	—	—	—	—	—	—	—
Copsewood	" Church Hall	—	—	—	—	1	1	—	—	—	—	—	—	—
	Totals	6	11	11	9	12	26	8	1	8	—	1	1	4

At 2 infant welfare centres 14 weekly sessions for U.V.L. are held in the winter months (October to March)

Prior to the 5th July, 1948, nine of the maternity and child welfare centres in the city were organised by voluntary committees and operated in conjunction with the maternity and child welfare section of the health department. The Council's approved scheme under the National Health Service Act brought all such centres under the direct control of the Health Committee. However at that stage Gulson Road Clinic was the only modern up-to-date centre which fulfilled the major requirements. The remaining clinics were held for the most part in church or chapel halls, and although we are grateful to the owners for allowing our occupation, the accommodation generally fell short of the accepted modern standard, and suffered from the defects inherent in improvisation.

On the 1st February, 1954, work was begun on a new combined infant welfare centre and school clinic at Broad Street, and the building was taken into use in January, 1956 and officially opened on 1st March, 1956. This modern building, situated at the junction of Broad Street and Stoney Stanton Road, brought considerably improved maternity and child welfare facilities to mothers and young children in the area.



Broad Street M & CW and School Health Clinic, Coventry

Coincidental with the opening of this centre, work was begun on another combined centre and clinic at Tile Hill to serve a rapidly developing area on the western periphery of the city. The original intention here had been to provide a comprehensive health centre, but a series of difficulties caused a major modification to the plans. I have made more detailed reference under "Health Centres (Section 21)" to the history of this project and the final realisation of a modified health centre with surgery accommodation for general practitioners (see also frontispiece). The Tile Hill Combined Centre and Clinic was taken into use in August, 1956 and officially opened on 15th March, 1957.

In October, 1956, in order to provide amenities to the rapidly developing Willenhall estate, two flats were kindly rented to us by the Housing Committee as a temporary measure and were adapted for clinic purposes. This new centre is situated about midway between the colliery village in Binley and the London Road in Willenhall.

Work was begun in 1958 on a new infant welfare clinic at Aldermoor Lane, and it is confidently hoped that it will be possible to open this building by June of next year.

There is still much to be done. The Health Committee's capital works programme for the next five years provides for new infant welfare clinics at Whoberley, Wyken, Willenhall, Cheylesmore, Holbrooks and Upper Stoke and it is possible too that there may well be an extension of health centre provisions if further accord with general practitioners can be reached.



Maternity and Child Welfare—A Mother Receiving Advice from a Medical Officer at Broad Street Clinic

In the meantime maternity and child welfare staff continue to work in unsatisfactory clinic premises in several parts of the city, although as much as possible is being attempted by way of repairs and redecorations to improve the facilities, and more satisfactory accommodation is being continuously sought in the interests of both public and staff.

A further major development of both interest and importance during the decade was that concerned with the assessment of hearing in the young child, with the inestimable benefit to any child with a defect of modern aids of hearing and augmentation by special aids. Training courses have been held in Coventry under the auspices of the Department of Education for the Deaf, Manchester University, and were attended by an adequate number of health visitors (all of whom obtained certificates of competence) to ensure its being possible for every child to have a screening test at about seven months. Two medical officers and two health visitors have attended

more advanced courses in Manchester which qualified them for the more specialised testing of children failing the screening tests and equipped them to give advice to parents who must needs shoulder the main burden of helping the handicapped child.

Care of Premature Infants.

Routine arrangements continue to operate in accordance with Ministry of Health Circular 20/44 to provide for :

The notification of all infants $5\frac{1}{2}$ lbs. and under at birth.

The availability of four premature baby sets, consisting of treasure cot filled pockets for hot water bottles ; rubber hot water bottles ; mackintosh covered flock pillows ; Gamgee suits and Belcroy feeders.

Each midwife keeps in reserve two Gamgee baby suits and a maternity outfit for emergency cases.

Oxygen supplies are available at the Health Department and at the Ambulance Station also, for the use of any doctor or midwife.

Special carry cots are available at the Ambulance Station for the transport of premature babies to hospital when necessary, and the acquisition of an Oxycot during this year has proved invaluable.

The services of a consultant paediatrician are available on request by medical practitioners in the city.

The following are statistics of premature live births occurring within the city during 1958 :—

- *1. The number of live premature babies notified in the city was 329.
2. Of the above, 129 were born at home, 197 in Gulson Hospital and 3 in nursing homes.
3. Of those born at home (129), 41 were transferred to hospital within 24 hours ; of the 88 remaining in their own homes, 4 died in the first 24 hours and 84 were alive at the expiration of one month.
4. Of those born in hospital (197), 27 died in the first 24 hours and 159 were alive at the expiration of one month.
5. Of those born in nursing homes (3), all were alive at the expiration of one month.

*The number of premature live babies born in Coventry and Warwickshire Hospital, Keresley, was 114. These are not included in the figure 329 shown above, as the hospital is in the county area.

Dental Care.

The Senior School Dentist (Mr. J. A. Smith) advises me that the following work (see table below) was accomplished during 1958 in connection with the Maternity and Child Welfare Service.

(a) Numbers provided with dental care.

	Examined	Needing treatment	Treated	Made dentally fit as far as possible
Expectant and Nursing Mothers	51	51	41	Dental sepsis eradicated but no dentures provided
Children under five	191	174	174	

(b) Forms of dental treatment provided.

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and gum treatment	Silver Nitrate treatment	Dressings	Radio-graphs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	64	—	13	1	3	—	—	4	—	—
Children under five	430	—	146	19	—	—	—	1	—	—

There was very little improvement in the recruitment position so far as dental officers were concerned, and our available dentists are almost fully occupied with acutely affected children and matters of urgency rather than with the conservative type of work for which the dental service was primarily constituted.

The number of treatments given to nursing and expectant mothers and children are as indicated in the table (page 38).

Provision of Maternity Outfits.

A stock of maternity outfits is held in the Health Department to supply the needs of expectant mothers who are to be confined at home. A recommendation signed by the midwife or doctor is required before issue.

In 1958 the number of such outfits issued without charge was 2,416. The outfits have been modified from time to time on the suggestions of attendant general practitioners and midwives.

Supply of Welfare Foods.

National welfare foods, dried milks from a selected list and other suitable preparations are stocked at the infant welfare centres, either for sale, or if the need is proved, for free issue.

During the year sales to the value of £14,509 3s. 3d., were made at the various centres ; this compares with £12,902 19s. 7d. in 1957 and £10,896 13s. 6d. in 1956.

The arrangements outlined in 1956 for the supply of national dried milk, orange juice and cod liver oil from a shop fitted out for the purpose in the basement of the new Council Offices functioned satisfactorily throughout the year.

Sales of National Welfare Foods at all Clinics during 1958.

National dried milk	full cream (tins)	105,913
	half cream „	2,276
Orange juice (bottles)	... ..	166,695
Vitamin tablets (packets)	... ..	15,059

NURSERY PROVISIONS

Day Nurseries.

The nine day nurseries have continued to meet the very real needs of a large industrial city where a high incidence of female labour is in employment. Since the advent of the National Health Service Act, the hatted nurseries at Holbrooks and Prior Deram Walk, Canley, were replaced by traditional type day nurseries in January, 1953 and April, 1955, respectively, and throughout the period under review the scheme for the training of nursery nurses has continued. In 1958, nine nurses received the N.N.E.B. certificate.

In 1954 an amendment to the standard of accommodation was made at the request of the Ministry of Health, whereby four of our

50 place nurseries were reduced to 40, and one from 80 to 70 places, the resultant total number of places being 425. This figure was subsequently increased to 435 in 1955 with the opening of the new day nursery at Papenham Green.



Part of Papenham Green Day Nursery

The average yearly attendance since the appointed day is 85,473 at all our nurseries, which compares with the total attendances for 1958 of 87,492.

DAY NURSERY	Number of Places	ATTENDANCES		Total Attendances
		Age 0 to 2 years	Age 2 to 5 years	
Papenham Green	50	4,374	6,247	10,621
Foleshill	70	7,049	6,494	13,543
Monks Park	50	4,651	6,578	11,229
Poole Road	40	2,829	5,206	8,035
Queen Phillippa	54	5,502	4,880	10,382
Stoke Green	55	4,107	6,870	10,977
Whoberley	40	1,737	6,265	8,002
Windmill Road	36	1,842	3,948	5,790
Wyken	40	2,933	5,980	8,913
Total	435	35,024	52,468	87,492

The total number of attendances during the year was 87,492, which over the 215 days the nurseries were open gave a percentage of 82%.

CARE OF UNMARRIED MOTHERS AND CHILDREN

Mother and Baby Home.

Our present arrangements for the provision of accommodation for unmarried expectant mothers and subsequently for the mothers and the babies, includes an agency arrangement with the Committee of St. Faith's Shelter, Coventry. During 1958, there were 40 mothers and 34 children accommodated in this shelter, for whose care and maintenance the local health authority accepted financial responsibility.

In addition the department has accepted responsibility for the maintenance of 32 unmarried mothers and their expected children in out-of-town homes (Birmingham, London, etc.) when there were special circumstances.

The provision of our own Home for Mothers and Babies still remains a matter for future decision by the Local Authority.

MIDWIFERY

(Section 23)

The approved scheme of the City Council under Section 23 of the National Health Service Act confirmed the existing Municipal Midwifery Service and provided for such extensions over a series of years as the growth of the city and changing conditions should



A Midwife at Work

warrant. The City Council is the local supervising authority under the Midwives' Act and has provided 16 Corporation "midwives" houses in certain districts and all midwives are provided with telephones.

The work of the domiciliary midwives (that is, municipal and private) is under the supervision of the Senior Assistant Medical Officer for Maternity and Child Welfare (Dr. J. M. Done) and the Non-Medical Supervisor (Mrs. E. E. Woodley) and they are directly responsible to the Medical Officer of Health for the efficient working of the service. An excellent liaison has been built up between the general medical practitioners and midwives.

In the early days of the period under review the City Council approved a loan scheme for the assisted purchase of their own cars by members of the Midwifery Service. The loans are repayable over a period not exceeding four years and many midwives continue to make use of this excellent facility.

During the year 1958 notice of intention to practise midwifery was received from the following :—

Municipal midwives	...	...	...	40
Midwives employed in nursing homes	...	...	...	2
Independent domiciliary midwives	...	...	...	6
Hospital midwives	...	...	...	15*

*Includes 2 part-time.

The number of births attended by the Municipal Midwifery staff of 40 in 1958 was 2,312 and is the highest since the appointed day of the National Health Service Act, showing an increase of 199 over the previous year (1957) and 299 over the 1948 figure, when the staff comprised 44 midwives.

A summary of statistics is given below :—

No. of births attended :				1957	1958
Doctor not present	...	...	...	2113	2312
Doctor present	...	...	...	263	261
				2376	2573
No. of visits paid :					
(a) Ante-natal	...	...	...	16118	18437
(b) Nursing	...	...	...	46122	50292
(c) Special visits	...	...	...	1093	2029
(d) Visits to patients returned from hospital	...	...	...	4321	5050
(e) No. of patients returned from hospital for nursing at home before the 14th day	...	...	...	1583	2151
					(303 before 5th day).
					(836 before 10th day).
No. of requests for medical aid	...	...	...	516	704

No. of cases transferred to hospitals ...	322	320
No. of cases in which gas and air analgesia was used	1779	1862
No. of cases in which Trilene was used ...	108	228
No. of abortions	15	19
No. of advisory attendances made at :		
(a) Ante-natal clinics	676	697
(b) Relaxation clinics	266	227
(c) Post-natal clinics	101	41
No. of gas and air machines in use in department	40	40
No. of Tecota Mark 6 machines for Trichloroethylene in use in department	2	4
No. of municipal midwives trained to use these machines	38	40

Two gas and air machines in the department have been replaced by two trichloroethylene machines.

The independent midwives attended 8 confinements during the year : they administered gas and air analgesia in 6 cases and sent for medical aid in 3 cases.

The number of births occurring in private nursing homes was 219, and there were 222 analgesic administrations, 218 Gas-air, 4 Trilenes.

HEALTH VISITING

(Section 24)

At the end of 1958 there were in the service 1 Superintendent ; 2 Deputies ; 29 Health Visitors ; 1 Part-time Health Visitor ; 6 School Nurses ; 5 Temporary School Nurses ; 4 T.B. Visitors ; and 2 Students in training.

It is disappointing that this is a decrease of 2 Health Visitors on the numbers in 1957, and, moreover, the student recruitment was poor during the year. A loss of 7 Health Visitors — 3 to the domestic commitments of married women and 4 to other authorities at home or abroad — was only partially mitigated by the higher student recruitment of 5 the previous year, and this at a time when work is expanding ; the number of births increasing yearly and, therefore, an increase in Health Visitors urgently required. Owing to an easing of the Corporation's restrictions on the employment of older women with superannuation liabilities, 3 of these were trained in 1957/58 and it seems that this is a potentially valuable field for recruitment, though whether it will be possible to do more than replace expected wastage remains to be seen.

The policy continues of appointing S.R.N.'s without the Health Visitors' certificate to do some of the work, and it is probable that there will always be some place for a small proportion of these nurses in an amalgamated Health Visitor/School Nurse establishment. A few

of the S.R.N.'s have become sufficiently interested by the work to embark on Part I midwifery training with a view to coming back as Student Health Visitors.

The policy of decentralization of staff begun in the New Tile Hill and Broad Street Clinics will be extended as more permanent clinics become available. In addition to the saving of travelling time in coming in to the office and out to the periphery, the Health Visitor is more readily available to the public at her centre.



A Busy Moment for the Health Visitor at an Infant Welfare Centre

Unfortunately, the situation with regard to clinics in some parts of the City is not so happy. It was hoped to have a centre at Jubilee Crescent to replace Links Road and plans for a permanent clinic were in hand but eventually the church hall was demolished, and, although it had been a most unsuitable building, we are nevertheless, now left without a substitute.

Owing to the fact that several Health Visitors left who were qualified to undertake screening tests of hearing, and also because of the increased pressure of work, it was not possible to consider routine screening for the whole under-five population. Health Visitors have, therefore, concentrated on the special groups with any predisposition to hearing difficulties, and for doubtful cases a consultative clinic in charge of Health Visitors with additional training and experience is held at Broad Street. Close co-operation with the hospital in this field continues and the provision of facilities for nursery children at the partially deaf class makes it all the more important that no child who could benefit from this provision should be denied it by failure to discover the hearing defect.

Ten Years of Health Visiting under the National Health Service.

(By Dr. J. M. Done—Senior M.O., for Maternity and Child Welfare).

There are so few Health Visitors left who were in the Service in 1948 that factual evidence as to reactions, apprehensions and/or hopes is not available, and one can only imagine the feelings of Health Visitors, trained to work in the maternity and child welfare field and virtually limited to work with expectant mothers and the under-fives, when the Act came into force. These Health Visitors had been trained as sick nurses, practising midwives, and by six months Health Visitors' Course, chiefly orientated on the care and development of the young child.

In just over ten years since the Midwives' Act, Health Visitors had seen a major part of their work with expectant mothers and in ante-natal clinics, provided by local authorities in default of other organised maternity schemes, pass to the Municipal Midwife now that she was a part of the Local Authority team. It was being said that Health Visitors had worked themselves out of a job, as infant mortality had fallen so dramatically and previous generations of Health Visitors had ensured an enlightened maternal population. Much of the work of the Health Visitor under Infant Life Protection was to pass to the new Children's Department.

It was said that Health Visitors were to become generalised family social workers and that this enlargement of their field would counteract any loss of territory in other fields. This has, in fact, come about but perhaps it seemed somewhat nebulous at that time to those who had previously been attracted by health visiting, and doubt about the future may have accounted for what may well be called the doldrums of health visiting in Coventry.

In 1948 it is reported that there were 29 Health Visitors on the staff and in 1952 only 17. During these years, while the number of births had fallen from 5,100 to 4,100, the overall population had risen from 250—260,000 and there were large numbers of children amongst the immigrant population, which had caused a large part of this rise. Moreover, all this time Health Visitors were expected to extend their duties to many visits concerning social conditions of groups outside the under-fives.

It seems that the changes in orientation, together with the frustration of coping with an increased task with falling numbers, was a major factor in failing to recruit or keep Health Visitors at this time, but the tide did, of course, turn long before any difference could be noted in annual reports.

A change in the Health Visitors' training syllabus was producing a more general type of social worker. Still with basic sick nursing training, students need not be fully practising midwives but need only take the Part I midwifery examination. In most training schemes the Health Visitors' Course was extended to an academic year and

became more integrated with Universities and Departments of Education. It concentrated more on social matters and on training in methods of health education.

The Assisted Student Training Scheme had begun to provide recruits under contract to serve two years as Health Visitors with the authority, and this has since proved to be almost the sole source of recruits. In common with the practice of other authorities, the period of contract was reduced to two years including the training, as experience showed that women were reluctant to bind themselves for three years ahead.

In 1948 it was reported that S.R.N.'s without Health Visitors' certificates had been appointed for certain clinic duties to save Health Visitors for work, which they only were qualified to perform. It is significant that the 1956 Working Party Report on Health Visitors specifically suggested that this course should be followed.

Before the 1952 nadir in the state of Health Visitors in Coventry, plans were being evolved for amalgamation of the Health Visitor/School Nurse Service. This was eventually completed in 1955. In addition to the overall rationality of such a scheme, it was felt that the extension of the field of interest would be more attractive to the recently qualified Health Visitor. This appears to have been a correct assumption, though the increase has been slow and not steady and the number of Health Visitors in 1958 is only the same as in 1948. The number of births is again on the same level as 1948 but the changes in work have been remarkable.

The amalgamated staff, of course, consists of 45 plus 3 seniors and much of the school work has to be done by S.R.N.'s without Health Visitors' certificates. However, if Health Visitors come to incorporate the School work in nursery, infant, and primary schools in their area, it is felt that this may prove adequate in these days when the secondary school child is likely to attend a large school served by several Health Visitors' areas, and where continuity of visiting would not, in any case, be possible.

Clinical ante-natal work by Health Visitors has almost died out but the importance of the education side in mothercraft classes is taking its place.

While the Health Visitor is not responsible for the established problem family, she is more than ever conscious of her preventive work in every family she visits ; in seeing that emotional and mental needs receive their due share of attention. She is asked to visit for many different social purposes and would seem to be filling the role of the "general purpose social worker" as sought by the Young-husband Committee. However, as stressed in the report of this Working Party on social workers, the numbers needed preclude any thought that Health Visitors could take over all the work.

In view of the fact that theirs is a four year training and sick nursing is a basic need, it would be unrealistic not to agree with the recommendation that a special shorter social training should be

instituted, such workers to take on much of the routine social work, provided that there were sufficient with a longer more advanced training to supervise.

It is just a pity that Health Visitors were so much outside the terms of reference of this committee and more details of their integration as social workers could not be given.

Health Visiting : Tabulation of Work.

	1958	1957
Ante-natal cases	594	649
Notified births	5,410	5,293
Revisits to notified births	14,630	15,528
" " Children aged 1—2 years 8,727		9,314
" " " " " 2—5 " 15,766	24,493	15,374
		24,688
Infant death enquiries	107	147
Stillbirth enquiries	82	93
<hr/>		
Visits to tuberculosis cases	6,263	6,160
" " non-pulmonary tuberculosis cases	355	351
" " B.C.G. cases by T.B. visitors	151	82
" " other infectious diseases	1,444	2,834
" " special cases	7,468	6,666
" " homes no reply	9,487	11,077
" " contacts of infectious diseases	441	341
B.C.G. visits for Medical Research Council	1,647	1,646
Sessions at Welfare Centres	4,795	4,873

HOME NURSING SERVICE

(Section 25)

In ten years of the National Health Service Act the staff engaged in the Home Nursing Service has increased as follows :—

	<i>As at 31st December.</i>		
	1949	1957	1958
Superintendent	1	1	1
Assistant Superintendents	—	2	2
Full-time Nurses	25	45	47
		(Incl. 4 male)	(Incl. 4 male)
Part-time Nurses	11	15	13
Clerk-Telephonist	—	1	1

(The 1958 figures show an improvement on those for 1949 by an increase of two Assistant Superintendents and twenty-two full-time nurses. There is a decrease, however, of two part-time nurses).

This traditional service working with quiet efficiency and considerable success before the inception of the National Health Service Act has, since the appointed day, augmented its ministrations to the sick. Male nurses were taken on to the staff and have proved invaluable in many particulars.

In the whole of the post-war period the Home Nursing Service has, by its efforts and in conjunction with the Home Help Service, succeeded in keeping many patients at home who would be occupying hospital beds. The problem of hospital beds and their acute shortage is still largely unresolved in the country today and the achievement of the District Nurse is no doubt viewed with equal appreciation by the hospital as by the Local Authority. Work in this connection with which the Service is involved may take any or all of the following forms :—

- (a) Post-operative wounds where surgical dressings are continued on a domiciliary basis.
- (b) Conditions requiring treatment by injection either prior or subsequent to hospital care.
- (c) Minor operations carried out in the home and continuation of treatments.
- (d) Maternity cases where infectious disease or septic complications exist, and in which the District Nurse takes over from either the hospital or the midwife.

During this period there has been a further considerable growth of antibiotic therapy which has made additional demands upon the nursing staff. 102,277 injections were given during 1958.

Another feature of this ten years of progress has been the steady increase, more so latterly, in the numbers of the aged population



A Home Nurse giving an Injection to a Patient.

requiring nursing assistance. The District Nurses gave attention to 2,648 pensioner cases in 1958 compared with 1,762 in 1956.

Throughout the decade under review affiliation has continued with the Queen's Institute of District Nursing and candidates for the Institute's examinations have been trained in fairly satisfactory numbers to help meet the needs of our own service and also on behalf of some other Local Health Authorities.

Nurses are accepted for training for admission to the Roll of Queen's Nurses three times a year, for a period of six months for a nurse whose name appears on the General Part of the State Register, and a period of four months in the case of a nurse who holds an additional certificate or who has a minimum of eighteen months experience in district nursing. During training the nurse may be either resident or non-resident.

The training consists of practical instruction in the adoption for use on the district of nursing techniques required in hospital. Included in the theoretical training are lectures on diseases such as diabetes, care of the aged and cancer ; also some essentials of Public Health Legislation.

In addition, observation visits are arranged to places of special interest such as a local Welfare Authority Old People's Home, a Geriatric Unit and various clinics run by the Maternity and Child Welfare Section of the Public Health Department.

At the expiration of the training period a practical and written examination is conducted through the Queen's Institute of District Nursing.

It is perhaps appropriate to record that the forthcoming year, 1959, will provide the Centenary Celebrations for the Queen's Institute of District Nursing, since it originally came to be started in a small way, in Liverpool, during 1859.

In order to increase the mobility of the Service, transport facilities have been improved and apart from allowances to nurses with their own cars, four departmental cars are now available for use by the staff. Evening duty coverage provides for part-time chauffeurs to convey the nurses on their assignments.

Statistics for Year ended 31st December, 1958.

	1949	1957	1958
Total number of cases attended ...	3,943	6,175	6,244
Number of new cases attended ...	3,444	5,276	5,235
Number of visits made, including night visits	148,891	218,040	212,335
Number of operations attended ...	66	17	30

New cases referred for treatment by :—

Private doctors	2,797	4,814	4,640
Health Department	435	107	186
Hospitals	210	355	409
	<hr/> 159,786	<hr/> 5,276	<hr/> 5,235

Results of treatment were as follows :—

Convalescent	2,502	2,512
Sent to hospital	754	636
Relieved	1,324	1,526
Died	586	583
Remaining under care	1,009	987
	<hr/> 6,175	<hr/> 6,244

An analysis of the work carried out during the year is given in the following table :—

No. of patients on the books at 1st January ...	1,009
No. of new patients during the year	5,235
No. of patients on the books at 31st December ...	987
No. of patients nursed during the year	6,244
*No. of visits paid	212,335

*Included in the number of visits paid are 2,061 supervisory visits made by the administrative staff.

<i>Reason for visit.</i>	1957	1958
Medical	4,621	4,785
Surgical	1,087	1,055
Infectious diseases	41	16
Tuberculosis	234	163
Maternal complications	192	225
Others	—	—
	<hr/> 6,175	<hr/> 6,244

Included in appropriate
categorisation :

Old Age Pensioners	2,658	2,648
Children under 5	317	379

Injections given in 1958

Insulin 44,398 ; penicillin 18,904 ; streptomycin 6,795 ; mersalyl 4,602 ; neptal 10,321 ; thiomerin 394 ; anahaemin 1,646 ; imferon 1,830 ; cytamin 5,364 ; campolon 203 ; vitamin B 439 ; testosterone 274 ; progesterone 179 ; A.T.S. 11 ; pituitrin 8 ; prostigmin 292 ; durabolin 77 ; myocardin 19 ; myocrisin 11 ; vitamin K 26 ; H.11 17 ; plexon 68 ; Vitamin C 6 ; eucortone 39 ; oestroform 26 ; silbephylline 4 ; viomycin 62 ; A.C.T.H. 35 ; heparin 40 ; becosym 53 ; parentrovite 115 ; synkavite 60 ; cortisone 60 ; aminophylin 40 ; cardophylin 21 ; pitocin 10 ; benerva 49 ; sodium gardinal 10 ; sodium amytal 3 ; dronoran 575 ; morphia 2,702 ; morphia & hyoscine 30 ; largactil 356 ; physeptone 107 ; pethadine 417 ; omnopon 336 ; omnopon scopolamine 431 ; sodium phenobarbitone 379 ; adrenalin 391 ; heroin 42.

Old age pensioners continue to receive a high number of nursing visits. The year's total of 2,648 pensioner cases (as against 2,658 in 1957) follows the countrywide pattern and forms part of the service's contribution towards the well-being of our ageing population.

There was a decrease in the injection therapy work during the year, when 102,277 injections were given (1957 : 105,660). It may be of interest to note here that 1,371 diabetic patients received 44,398 injections of insulin.

The Ministry of Health requested information for my 1957 annual report as to the effectiveness of the Home Nursing Service in relieving pressure on hospitals by providing home care for patients who might otherwise have to be admitted to hospital. These details were duly given and reference in this connection should be made to my report for that year.

VACCINATION AND IMMUNISATION

(Section 26)

The scheme approved by the Minister under Section 26 of the National Health Service Act provided for a continuation and extension of the City Council's scheme for the immunisation of children against diphtheria and whooping cough ; it also provided for a general voluntary scheme for the vaccination of infants against smallpox. The advent of poliomyelitis vaccine has considerably increased the activity of the department and stocks of the appropriate vaccines for immunisation procedures are held in cold storage. Vaccine is available to general medical practitioners as well as our own medical staff.

During the past ten years 34 cases (involving 5 deaths) of diphtheria have been notified to me. During the same period 39,726 diphtheria immunisations have been given, together with 22,944 secondary or boosting injections. The dangers of over-optimism and moreover, complacency, on the part of the public when a disease has to a large extent been eliminated from our midst, have been referred to frequently in my annual reports over the last ten years and it is to be regretted that in spite of repeated public pronouncements as to the great advantages of immunisation, more intensive interest appears to be evident only when there are fresh notifications or an unfortunate death arising from the disease. 3 cases of diphtheria were notified in the city in 1958. I would accordingly again plead with all parents to ensure that their children are adequately protected against this insidious and serious condition.

In addition to the above facilities, the department ensures arrangements upon request whereby travellers to foreign countries may be immunised according to International Regulations against such diseases as typhoid, cholera and yellow fever.

Vaccination

Throughout the period under review the number of voluntary requests received for vaccination against smallpox has been consistently higher each year than the rate recorded in the days of compulsory vaccination prior to the National Health Service Act. Some 2,938 persons were vaccinated for the first time during 1958. This is an increase of 39 over the previous year, 2,329 more than in 1948 and gives an approximate increase of 382% in the vaccination rate over 1948 — real cause indeed for satisfaction.

The following are statistics available for the year ended 31st December, 1958 :—

Number of invitations sent out to parents of newly-born children :—

for vaccination	...	...	4,395
for immunisation	...	...	4,395

Completed Immunisations and Vaccinations.

		<i>Infant Welfare</i>	<i>Private Doctors</i>	<i>Schools</i>	<i>Totals</i>
(a)	For diphtheria immunisation including combined ...	2,415	1,739	784	4,938
(b)	Secondary or boosting injections	93	336	1,997	2,426
(c)	For whooping cough immunisation including combined	2,342	1,784	—	4,126
(d)	For vaccination †	1,585	1,353	—	2,938
(e)	For revaccination *	13	290	—	303

†This figure includes 23 vaccinated at the Health Department.

*20 people were re-vaccinated at the Health Department.

Anti-Poliomyelitis Vaccination

There have been 483 cases of poliomyelitis (paralytic and non-paralytic) notified during the past ten years : the worst years being 1953, when 164 cases were notified, and 1957, when 116 cases came to attention.

There is much cause for satisfaction that in 1958, not one single case of poliomyelitis was notified.

Free vaccination against poliomyelitis was introduced by the Minister of Health in 1956 for the protection of those children born in the years 1947 to 1954 inclusive. The acceptance rate for the eligible age groups in this city was only 38% : a low figure attributed to adverse publicity as a consequence of an unfortunate incident in the United States relating to Salk vaccine. By the end of 1956 about 1,000 children had received the then "complete" course of two injections and about 800 had received one injection only. There were no significant untoward reactions and none of the injected children subsequently developed poliomyelitis. The incidence of this disease in 1956 was also quite low, there being only 17 notified cases.

In 1957 the vaccination scheme, which hitherto had been administered solely by the Local Authority medical officers, was extended so that general medical practitioners could, where they wished, participate. Some 89% agreed to do so.

As I have indicated, 1957 was an unhappy year with 116 cases notified. Despite this high incidence and a serious shortage of medical officers during the year, approximately 12,000 children were completely vaccinated and a further 1,000 had their first injection. At the end of the year some 10,000 applicants awaited vaccination.

By the end of 1958 there was real improvement. 43,490 children in the city had been completely vaccinated, 109 had received their first injection and only about 100 awaited vaccination. The vaccination scheme, which by now had been extended to include the age groups up to 25 as well as expectant mothers, had also given protection to 1,055 expectant mothers and 196 young people over the age of 15 years.

We must not be complacent, however, with this take-up and it is in mind for 1959 to hold "open clinics" whereat members of the public entitled to this facility may call on the most informal lines and with the least inconvenience to themselves to receive the protection available.

POLIOMYELITIS VACCINATION (As at 31.12.58)

Year of Birth	APPLICATIONS REGISTERED FOR VACCINATION			No. OF PERSONS VACCINATED (Two INJECTIONS)				No. Given Booster Injection	No. who received one injection only by 31.12.58	No. of Persons for whom applications registered but at 31.12.58 had not had any injection
	Before April 1956	From April 1956 to Dec. 1957	From Jan. to Dec. 1958	Total	Up to Dec. 1956	From 1.12.56 to 31.12.57	From 1.1.58 to 31.12.58			
1943-1958	13,629	9,272	31,927	54,828	1,014	10,999	31,487	2,385	290	8,653
1933-1942	—	—	372	372	—	—	196	—	—	176
Expectant Mothers	—	5	1,065	1,070	—	—	1,055	—	7	8
Special Groups	—	—	467	467	—	—	467	—	—	—
TOTALS	13,629	9,277	33,831	56,737	1,014	10,999	33,205	2,385	297	8,832

Total Applications registered	...	56,737
Persons Vaccinated :	Three injections ...	2,385
	Two injections ...	45,218
	One injection ...	297
	Persons still awaiting Vaccination	8,837

Sonne Dysentery

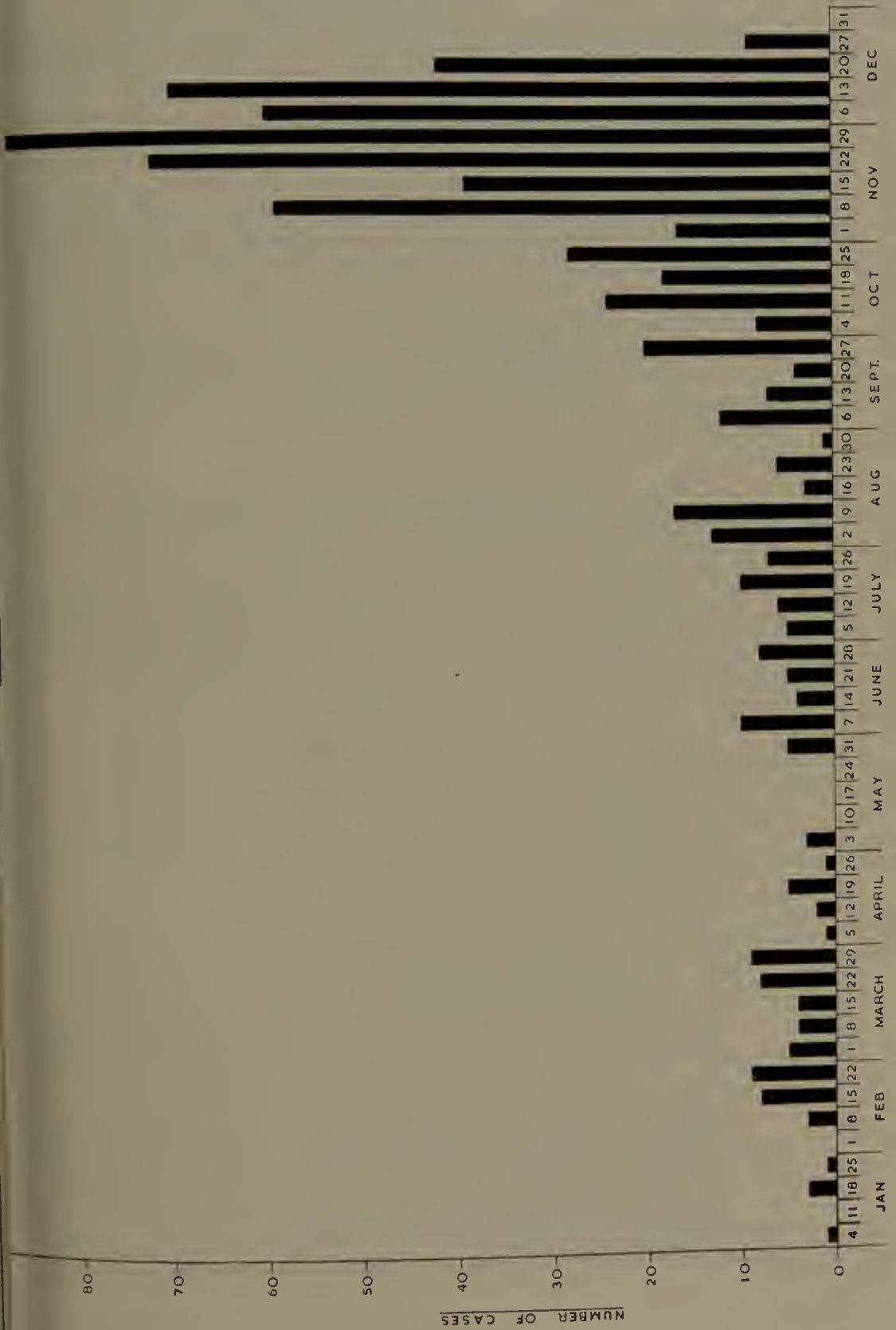
This infection accounted for some 743 cases in 1958, of which no less than 533 occurred in the quarter ending December.

The incidence of cases was highest in the toddlers' group before school entry and to a lesser degree in the school age group.

Detailed advice continues to be given to all people who may be concerned in controlling this condition. With regard to the school population, the pattern of advice is as stated in my Annual Report for 1956.

The following table indicates the incidence in the four quarters for 1958 per age group and the totals are compared with the figures for 1956 and 1957.

1958	0—1	1—4	5—14	15—24	25—44	45—64	65+	Total
1st Quarter ..	5	22	16	3	5	4	—	55
2nd Quarter ..	3	18	14	4	4	1	—	44
3rd Quarter ..	6	57	26	4	17	—	1	111
4th Quarter ..	22	222	190	29	63	6	1	533
TOTALS ..	36	319	246	40	89	11	2	743
1956	45	347	638	55	180	54	15	1334
1957	44	181	275	22	85	30	8	645



AMBULANCE SERVICE

(Section 27)

The City Council's originally approved proposals under Section 27 of the National Health Service Act provided for a complete Ambulance Service to meet the needs of all citizens in the Local Health Authority area ; the administration to be carried out through the then City Ambulance Service (which comprised 8 ambulances and 2 cars) and by agency arrangements with the Coventry and Warwickshire Hospital Saturday Fund Committee whose fleet comprised 12 reconditioned ex-W.D. ambulances. The staff and vehicles of both services were to operate from a central ambulance depot in Swanswell Terrace, to which the City Ambulance unit moved in November, 1948.

A " free " ambulance service produced many initial problems since facilities were required by every section of the community who, in the first year took full advantage of their rights (and on occasions attempted to take more !) The early abuses of the service however were, in effect, " teething pains " which came to be resolved quite readily.

In 1949 a Joint Ambulance Committee of members of both the Local Health Authority and Hospital Saturday Fund was set up in implementation of an agreement between these two bodies. The Committee acted in an advisory capacity to the respective bodies on certain matters affecting the service and its personnel. It did valuable work until its dissolution in July 1953 when all vehicles and personnel passed to the control of the Health Committee, although the garage, control room and offices were retained on rental from the Hospital Saturday Fund.

Amongst many improvements effected in the period under review are :—

- (a) The setting up of an enquiry kiosk and control desk at the Coventry and Warwickshire Hospital whereat a liaison officer was installed for the co-ordination of patient's needs with ambulance availability.
- (b) The daily provision of an ambulance vehicle at Baginton Airport, which continued for over five years until 1956 when the Aerodrome Committee made their own provision.
- (c) The installation of radiotelecommunication equipment in a large proportion of the ambulance vehicles in 1951 which has had the progressive result of much economy in both vehicles and men.

A still further development in this important radio link brought about by the imminent introduction of new wave-lengths began in 1958 when arrangements were made to replace, over a three year period, existing equipment and so ensure not only better quality intercommunication but also over a wider range.

- (d) The introduction of sitting case vehicles as part of the ambulance fleet to provide maximum facilities to those patients not in

need of stretcher ambulances produced a saving in running costs. The sitting case vehicles are invaluable of course in meeting the demands of hospital out-patients.

- (e) The provision of a vehicle-wash which has been a great boon to the ambulance personnel in the more convenient cleaning of ambulances.
- (f) The early provision of Novox Resuscitators and more latterly by the much improved "Minuteman" apparatus.

In the ten years under review the daily average of all patients carried by the Ambulance Service has increased from 181 in 1949 to 280 in 1958. During the same period the patients carried increased from 66,105 in 1949 to 102,112 in 1958. The mileage increased by only approximately 9,500 in 1958 compared with the 1949 figure. The mileage per patient carried fell during the period from 5.25 in 1949 to 3.49 in 1958.

I am indebted to the Ambulance Superintendent (Mr. F. G. Warwick) for the following detailed report :—

Staff.

The staff engaged in this service was as follows ; (the comparative figures for 1957 are shown in brackets :—)

	1957.	1958
Superintendent...	(1)	1
Deputy Superintendent	(1)	1
Sub-Officer	(1)	1
Shift Leaders	(4)	4
Sub-Shift Leaders	(4)	4
Ambulance Drivers (Male)	(45)	46
Ambulance Drivers (Female)	(11)	11
Attendant (Female)	(1)	1
Mechanics, Grade 1	(6)	6
Mechanics, Grade 2	(1)	1
Telephonist	(1)	1
Cook, part-time	(1)	1
Total	(77)	78

This is 5 below the authorised establishment of 82 personnel.

The following table shows the years of service of the Corporation employees concerned :—

35 years' service or over	...	...	...	1
20 years' service or over	...	...	...	1
15 years' service or over	...	...	...	4
10 years' service or over	...	...	...	16
5 years' service or over	...	...	...	35
Under 5 years' service	...	...	...	21
Total	...	...	...	78

Vacant Posts.

There were 4 applications for vacancies but only 3 of these were appointed. 2 members left the Service during the year.

Health of Staff.

There was an increase in certified illness during 1958, the days so lost numbering 870 compared with 837 for 1957. A further 22 days were lost through absence without leave.

Duties and Leave.

The Shift Leaders, Sub-Shift Leaders and Male Drivers work on a three shift system, with hours of duty as follows : 6—2, 2—10 and 10—6.

Alternate 40 and 48 hour weeks are worked by all personnel, who are paid weekly. As in all seven-day services some overtime is inevitable, and this is arranged as necessary according to demands on the service.

Vehicles.

The operational strength of vehicles at 31st December was as follows :—

General purpose ambulances	...	...	10
Small sitting case ambulances	...	...	14
Large sitting case ambulances	...	...	2
			—
			26
			—

The maximum carrying capacity of all these vehicles at any one time would be :—

Stretcher cases	...	...	...	...	28
Sitting cases	...	...	...	...	127

Other vehicles operated by the department include : 2 Hillman estate cars mainly for mental health, 1 Hillman Husky (Staff Car). 1 Land Rover for Garage Use.

Petrol and Oil Supplies.

Supplies of petrol and oil are obtained in accordance with the Council's bulk purchasing arrangements and are stored in bulk tanks. The service provides fuel on charge for all vehicles of the Health Department and Civil Defence ambulances, and in addition, by mutual arrangements, for vehicles from other ambulance services coming to or passing through the city on production of a standard requisition.

Uniform.

Uniform clothing, comprising jacket, trousers (or skirts for lady drivers) hats, footwear, shirts and ties and overcoats or rain-coats are supplied at twelve-month intervals, through bulk purchase arrangements.

Method of Transmission of Calls.

All telephone calls are received through the switchboard in the Control Room on Coventry 25041/2/3, or by one of the direct lines from the Fire Brigade, the City Police, Coventry and Warwickshire and Gulson Hospitals ; additionally a hand-operated telephone connects the Control Room with the Ambulance enquiry kiosk at the Coventry and Warwickshire Hospital.

By arrangement with the G.P.O. an additional telephone with a distinctive sounding bell is connected direct to the senior operator at the Telephone Exchange for the purpose of receiving " 999 " calls (priority) and this ensures immediate attention.

Over 2,825 calls were received on this line alone.

Ambulance Enquiry Kiosk.

The ambulance enquiry kiosk in the main entrance hall at the Coventry and Warwickshire Hospital is staffed during the daytime from 9 a.m. till 5.30 p.m. by a member of the Ambulance Service, whose duty it is to receive, correlate, and co-ordinate all hospital out-patient requirements before passing them to the ambulance control room. This system reduces the amount of waiting time for patients and obviates the duplication of requests and journeys.

Radio Telecommunications.

As new vehicles are purchased, radio equipment is transferred to them from older vehicles, or those which are to be used less, but there are still only 17 mobile sets available for the full fleet of 30 vehicles, although plans are in hand to increase the number of sets.

Arising partly from the continued use of V.H.F. radio the average mileage per patient is 3.49. Maintenance of this special equipment is carried out at regular intervals by the manufacturers' service department.

Accident and Emergency Journeys.

The number of accident and emergency journeys made during the year was 4,612, this differing only slightly from the year 1957 which was 4,880.

There is still very little change in the rate of home accidents, the total being 1,449 : of these, 40 cases received burns by fire and none of these had to be transported to the Burns Unit, Birmingham Accident Hospital.

Of the 4,612 accident cases attended, 130 were outside the City boundary.

The following table indicates the source of origin of accident calls received :—

“ 999 ” calls from members of the public	...	2,825
Calls on 25041 (mostly from industrial premises)		631
Doctors on 25041	... ..	1,000
Police private line	... ..	43
Fire Brigade private line	... ..	30
Hospital private line	... ..	34
Verbal messages to control room	... ..	12
Vehicle radio from ambulances on other work	...	37
		<hr/> 4,612 <hr/>

Services not Required (Accidents).

Of the 4,612 accident calls responded to, on 325 occasions the services of the ambulance were not required on arrival.

Resuscitators.

In November, 1958 the second Stephenson Minuteman Resuscitator was received, which has been a great asset to this service. During the three months it has been in service, it has been used 19 times, 9 of which were successful.

The Novox Resuscitator was used on 6 occasions during the year, 4 of which were successful.

Occupation Centre, Burns Road.

Transport for conveyance of the pupils to and from the Occupation Centre is now hired from a local coach operator, but three escorts daily are provided by this service. The number of pupils carried by the contractor was 45,400.

City Traffic Congestion.

Some delay has been noted as a result of traffic congestion in the central streets of the city, especially during peak periods, but with police co-operation these are reduced to a minimum.

Treatment at the Royal Pump Rooms, Leamington Spa.

Patients are taken each day from their homes in Coventry to the Pump Rooms at Leamington for various forms of spa treatment. This service conveyed 4,432 patients in the year.

Civil Defence.

Driving instructions are still given at weekends to Civil Defence personnel. The two Civil Defence ambulances for this purpose are manned by Civil Defence instructors. Lectures have been given by two Ambulance Officers to members of the Civil Defence Corps.

Transport of Patients by Train.

The facilities offered by British Railways for the conveyance of patients to distant places by train have been used for 95 patients. The special "Parrot" stretcher was used on 25 occasions for transporting bedridden patients.

The 95 journeys by train have resulted in a saving of 15,032 miles for the ambulance vehicles. The temporary absence of both vehicles and personnel is a feature of long distance journeys, and any reduction in these calls is to be encouraged.

General.

The extent of the demand from the Hospital Management Committee for the transport of patients to hospitals and homes outside Coventry will be seen from the following list of places to which 9,173 patient journeys were made during 1958 :—

The Towers, Kenilworth	Creaton Sanatorium, Northampton
Kenilworth Convalescent Home	Birmingham—General Hospital
Warwick Central—Leigh House	Maternity Hospital
Warwick—King Edward VII	Eye Hospital
Chest Hospital	Women's Hospital
Warwick Hospital	Queen Elizabeth
Pump Rooms, Leamington	Hospital
Warneford Hospital, Leamington	Accident Hospital
River Park Nursing Home,	Dudley Road
Leamington	Orthopaedic Hospital
George Eliot Hospital, Nuneaton	Ministry of Pensions
Manor Hospital, Nuneaton	Woodlands Hospital
Higham Grange	Romsley Sanatorium
Bramcote Hospital	Marston Green Hospital
Blackwell Recovery Hospital	Harboro Magna Hospital
St. Cross Hospital, Rugby	Smethwick Hospital
St. Luke's Hospital, Rugby	Grendon Hospital
Bolehill, Tamworth	St. Wulstan's, Malvern
St. Peter's, Droitwich	Gables House, Droitwich
Ronkswood Hospital, Worcester	Ratcliffe Hospital, Oxford
Manfield Hospital, Northampton	Bradwell Hospital, Stoke-on-Trent
Leicester Royal Infirmary	

Occasional abuses of the ambulance service facilities and a few difficulties occur which are common in all similar services from time to time, but these have dwindled to negligible proportions and are usually dealt with by the officer on duty.

In conclusion I would say that we in the Ambulance Service appreciate very much the interest shown by the Health Committee in the running of the service, and the most helpful day to day liaison with the Health Department. I also wish to thank the City Police, the Fire Brigade, and the hospital staffs for their valued co-operation throughout the year."

AMBULANCE SERVICE
Record of Work Performed for Year Ending 31st December, 1958

(1)	(2)	(3)	(4)	(5)	(6)	(7)
	No. of vehicles at 31.12.58	Total No. of journeys during year	Total No. of patients carried during year	Number of accident and emergency journeys during year (incl. in column 3)	Total mileage during year	No. of paid whole time staff at 31.12.58
1958						
Directly Provided Service(s)						
Ambulances Sitting Car Ambulances	10	20,889	49,651	4,208	144,105	—
	16	16,685	52,461	404	212,509	77
Agency Service(s)	—	—	—	—	—	—
Ambulances Sitting Car Ambulances	—	—	—	—	—	—
Supplementary Service(s)	—	—	—	—	—	—
Ambulances Sitting Car Ambulances	—	—	—	—	—	—
TOTALS	26	37,574	102,112	4,612	356,614	77

CLASSIFICATION OF PATIENTS CONVEYED.

Patients involved in Accidents	For treatment	After Treatment	Admissions	Discharges	Transfers	House to House	Total
4,577	302,242	37,663	8,090	5,561	8,950	129	102,112

TRANSPORT AND OTHER WORK (NUMBER OF JOURNEYS).

Home Nursing Service	Municipal Midwives	Public Health Dept.	Civic Airport	Civil Defence	Miscellaneous	Total
6	11	52	9	2	30	110

SUMMARY OF THE LAST 6 YEARS' WORK.

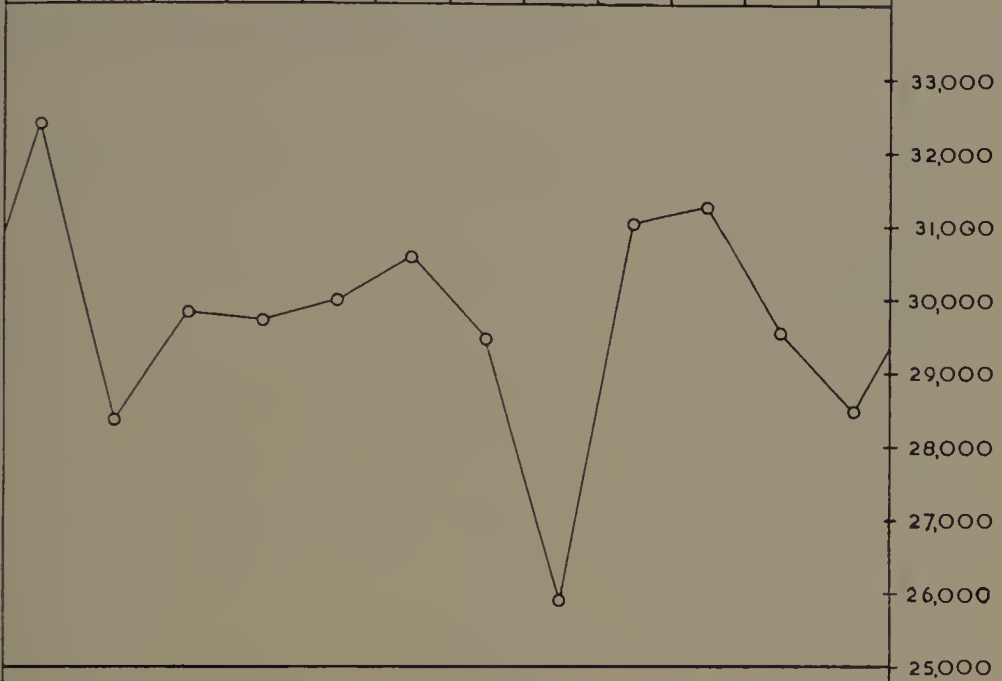
	1958	1957	1956	1955	1954	1953
No. of Ambulances	26	26	23	24	25	25
No. of Cars	—	—	1	3	3	5
Number of paid whole-time Staff	77	76	76	75	76	80
No. of journeys						
by Ambulance	37,574	35,678	34,923	35,854	34,386	30,329
by Car	—	70	1,498	1,468	3,382	7,106
Total	37,574	35,748	36,421	37,322	37,768	37,435
No. of Patients						
by Ambulance	102,112	93,086	99,012	114,045	113,449	100,215
by Car	—	147	2,293	1,815	5,573	12,421
Total	102,112	93,233	101,305	115,860	119,022	112,636
% increase or decrease over previous year	8.7 Increase	7.96 Decrease	12.56 Decrease	2.6 Decrease	17.6 Increase	10.98 Increase
Total Mileage						
by Ambulance	356,614	340,896	344,809	362,194	346,127	355,584
by Car	—	843	25,840	30,774	74,407	102,207
Total	356,614	341,739	370,649	392,968	420,534	437,791
% increase or decrease over previous year	4.36 Increase	7.8 Decrease	5.67 Decrease	1.52 Decrease	2.53 Decrease	1.71 Increase

Total No. of patients during the 6 years as above	..	..	644,168
Total mileage during the 6 years as above	..	..	2,320,295
Average mileage per patient during the last 6 years	..	..	3.6

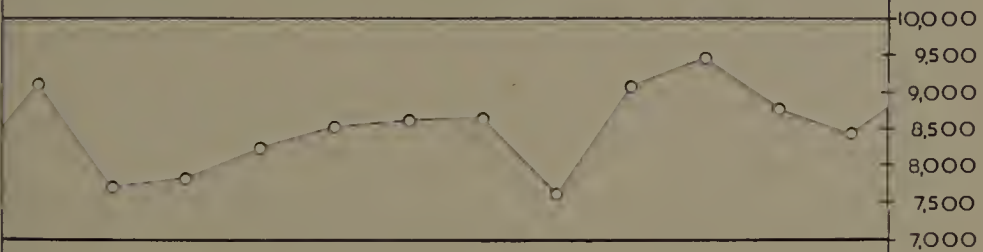
<i>Analysis of Patients Conveyed in Journeys out of Town</i>	<i>Total</i>
Patients discharged from, or after treatment at Coventry Hospitals to places outside the City	158
Patients for or after treatment in Hospitals or Clinics outside Coventry (excluding Keresley Hospital)	4,759
Patients discharged from Hospitals, Nursing Homes or Convalescent Homes outside Coventry (excluding Keresley Hospital)	725
Removals from private houses in Coventry to private houses in other towns	10
Admissions to Hospitals, Nursing Homes or Convalescent Homes outside city (excluding Keresley Hospital)	1,759
Transfers from Coventry Hospitals or Clinics to Hospitals, Convalescent Homes or Clinics outside Coventry, (excluding Keresley Hospital) or return	1,762
Total ..	9,173
Number of journeys by road of 50 miles or over from Coventry ..	397

1958.

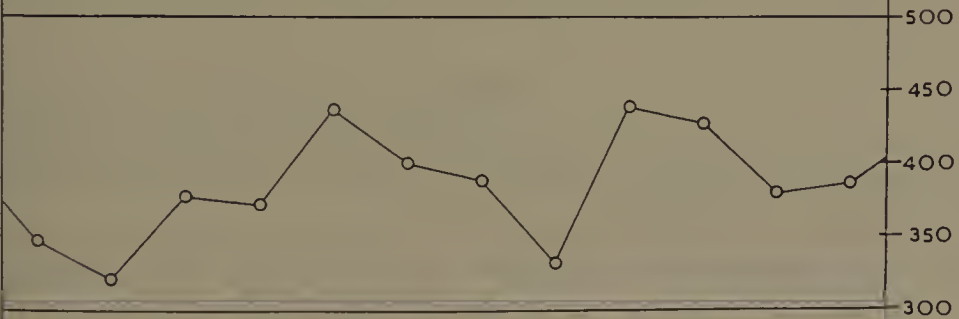
JAN FEB MAR APR MAY JUNE JULY AUG SEPT OCT. NOV DEC.



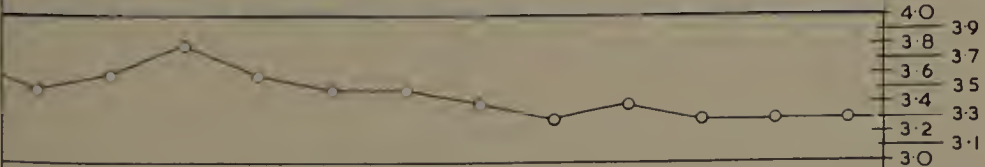
MILEAGE PER MONTH.



MONTHLY FLOW OF PATIENTS.



MONTHLY ACCIDENT RATE.



AVERAGE MILEAGE PER PATIENT.

JAN FEB MAR APR MAY JUNE JULY AUG SEPT OCT NOV DEC

SCALE

ANALYSIS OF PATI

FROM	TO :	C. & W. Hospital	Gulson Hospital	Keresley Hospital	Isolation Hospital	Paybody Hospital	Highview Hospital	Allesley Hall	Dover Street Clinic	Gulson Road Clinic	Nursing Home	C. & W. Hospi tal Mortuary
HOME	20,791	3,958	2,463	624	11	362	6	3044	125	104	110	
C. & W. HOSPITAL	1	645	1,077	263	43	17	364	11	4	4	2	
GULSON HOSPITAL	276	13	97	258	4	30	4		1	7	196	
KERESLEY HOSPITAL	835	43	15	463	—	—	—	—	—	9	200	
DOVER STREET CLINIC	9	—	—	4	1	—	—	—	—	1	—	
PAYBODY HOSPITAL	16	3	—	5	—	3	36	1	—	—	—	
ALLESLEY HALL	55	—	—	—	4	6	—	—	—	3	—	
NURSING HOMES	3	4	2	—	—	—	—	—	—	1	3	
PUMP ROOM LEAMINGTON	—	—	—	—	—	—	5	—	—	—	—	
CITY ISOLATION HOSPITAL	225	208	365	—	3	8	—	1	1	1	44	
GULSON ROAD CLINIC	—	1	1	1	—	—	—	—	—	—	—	
HIGHVIEW HOSPITAL	1	2	—	—	—	1	—	—	—	—	—	
OLD PEOPLE'S HOMES	34	3	—	—	—	6	—	—	—	—	—	
THE TOWERS, KENILWORTH	—	6	—	—	—	—	—	—	—	—	1	
KENILWORTH CONVL. HOME	—	2	—	—	—	—	—	—	—	—	—	
SPECIAL SCHOOLS	1	—	—	—	—	—	—	1	—	—	—	
DISCHARGES FROM OUT OF TOWN HOSPITAL	—	—	—	—	—	—	—	—	—	—	—	
OTHER HOSPITAL OR CLINIC... ..	10	25	1	14	1	—	2	—	—	1	—	
OCCUPATION CENTRE	—	—	—	—	—	—	—	—	—	—	—	
RAILWAY STATION	4	—	1	—	1	—	—	—	—	—	—	
TOTALS	31,261	5,003	4,022	1,632	68	433	417	3,058	131	131	55	

Plus :—

PERSONS INVOLVED IN THE FOLLO

STREET	COLLAPSE	HOME	SPORT	SCHOOL	CHILDREN AT PLAY	WORK	FACTORY
1,296	577	1,449	89	308	48	98	58

EYED DURING 1958

Watwick Central Hospital	Pump Room Leamington	Old Peoples' Home	Children's Home	Convalescent Homes	Railway Station	Special School	Burns Road School	Other Hospital	Other Clinic	Work	The Towers Kenilworth	Kenilworth Convl.-Home	TOTAL
557	2,213	5	—	77	110	35	1	1,015	253	10	—	—	45,361
51	—	41	—	5	12	12	2	54	4	—	—	1	33,838
10	—	7	1	31	6	—	—	105	—	—	1,126	585	4,869
—	—	2	—	—	2	—	—	1	—	—	—	—	3,900
—	—	1	—	—	—	1	21	—	1	—	—	—	2,950
—	—	—	—	—	—	—	—	—	—	—	—	—	146
—	5	1	—	7	—	—	—	5	2	—	—	—	345
1	—	—	—	—	—	—	—	1	—	—	—	—	41
—	—	—	—	—	—	—	—	—	—	—	—	—	2,224
11	—	—	—	7	2	—	—	44	3	—	1	—	1,256
—	—	—	—	—	—	—	—	—	—	—	—	—	357
—	—	1	—	—	—	—	—	1	—	—	—	—	65
—	—	2	—	—	1	—	—	—	—	—	—	—	47
—	—	—	—	—	—	—	—	—	—	—	—	—	695
—	—	—	—	—	—	—	—	—	—	—	—	—	57
—	—	—	—	—	—	—	—	—	—	—	—	—	37
—	—	—	—	—	—	—	—	—	—	—	—	—	543
—	—	—	—	—	—	—	—	6	1	—	—	—	742
—	—	—	—	—	—	—	—	—	—	—	—	—	2
—	—	—	—	—	—	—	—	—	—	—	—	—	60
36	2,218	60	1	127	133	48	24	1,232	264	10	1,127	586	97,535

ENT AND EMERGENCY JOURNEYS

MATERNITY	ILLNESS	OTHER TYPES	S.N.R.	TOTAL NO. OF JOURNEYS	TOTAL NO. OF PATIENTS
3	35	—	325	4,612	4,577

VEHICLES IN USE

General Purpose Ambulances.

<i>Fleet No.</i>	<i>Registration Number</i>	<i>Make</i>	<i>H.P.</i>	<i>Date Purchased</i>	
2	TVC 560	Bedford	27	June	1957
3	TVC 561	Bedford	27	June	1957
21	MWK 221	Bedford	27	February	1953
40	PHP 40	Bedford	27	October	1954
41	PHP 41	Bedford	27	November	1954
42	PRW 451	Karrier	33	October	1954
44	RVC 44	Bedford	27	November	1955
45	SDU 45	Bedford	27	March	1956
46	RVC 46	Bedford	27	March	1956
47	TDU 680	Dennis Diesel	49	February	1957
					1958 Totals

Sitting Case Ambulances.

1	TRW 846	Karrier	16	May	1957
6	WDU 258	Morris " J " 2	14	June	1958
7	WDU 257	Morris " J " 2	14	June	1958
8	WDU 259	Morris " J " 2	14	June	1958
15	MWK 315	Morris " J " 2	14	December	1952
16	MWK 316	Morris " J " 2	14	December	1952
17	MWK 317	Morris " J " 2	14	February	1953
18	MWK 318	Morris " J " 2	14	February	1953
22	MKV 288	Karrier	16	May	1953
35	PDU 35	Morris " J " 2	14	July	1954
36	PDU 36	Morris " J " 2	14	July	1954
37	PDU 37	Morris " J " 2	14	July	1954
38	PDU 38	Morris " J " 2	14	August	1954
39	PDU 39	Morris " J " 2	14	September	1954
49	TWK 15	Morris	14	April	1957
50	TWK 16	Morris	14	May	1957
					1958 Totals

Utility Vehicles

4	MHR 430	Land Rover	16	January	1958
5	VKV 647	Hillman Husky	14	May	1958
43	RKV 643	Hillman Minx	10	November	1955
48	THP 551	Hillman Minx	10	February	1957
					1958 Totals

Vehicles withdrawn from Service during the Year.

14	MHP 579	Morris P.V.	14	August	1952
19	MWK 219	Bedford	27	November	1952
20	MWK 220	Bedford	27	January	1953
					1958 Totals

DECEMBER, 1958

Vol med ns)	Oil Consumed (Pints)	M.P.G.	Total Vehicle Mileage	Age of Vehicle	
				Years	Months
17	177	11.0	28,948	1	7
80	134	9.7	20,605	1	7
26	36	11.4	74,268	6	0
54	151	11.1	74,612	4	3
40	247	11.2	66,952	4	2
30	45	7.2	32,056	4	3
87	331	11.5	51,477	3	2
38	231	11.2	48,663	2	10
30	273	11.6	44,400	2	10
23	128	24.1	27,940	1	11
14	1753	11.6	Average Age at 31.12.58	3	3
58	47	14.3	19,662	1	8
58	31	19.2	10,353	—	7
58	24	20.1	10,038	—	7
22	44	17.6	9,586	—	7
5	46	16.9	106,679	6	1
5	93	17.0	100,331	6	1
4	86	15.9	86,553	5	11
3	92	18.7	110,307	5	11
2	61	13.2	72,426	5	8
2	42	15.3	69,911	4	6
7	105	16.0	73,355	4	6
6	112	16.1	75,551	4	6
1	54	17.1	55,441	4	5
2	90	15.3	68,832	4	4
4	107	18.7	30,644	1	9
4	92	17.2	30,418	1	8
1	1,126	16.7	Average Age at 31.12.58	3	8
6	37	13.4	2,627	1	0
3	10	19.2	3,331	—	8
9	54	23.1	20,662	3	2
4	35	24.0	24,724	1	11
2	136	21.4	Average Age at 31.12.58	1	8
1	37	10.0	69,632	6	5
4	56	10.8	67,550	6	2
3	30	12.5	70,495	6	0
8	123	11.3	Average Age at 31.12.58	6	2

CHART SHOWING THE DAILY
MAXIMUM & DAILY AVERAGE
NUMBER OF PATIENTS REMOVED
THROUGHOUT THE YEAR.

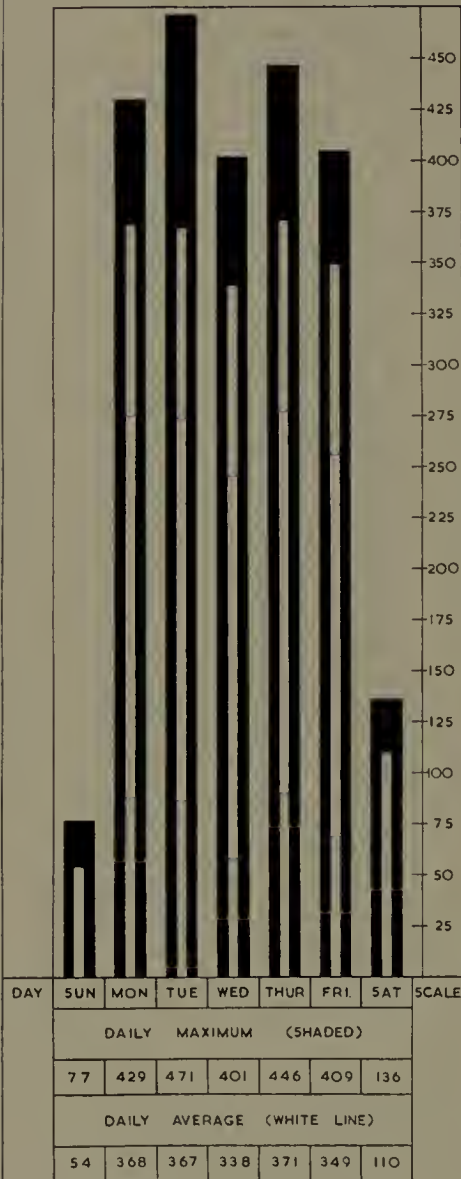
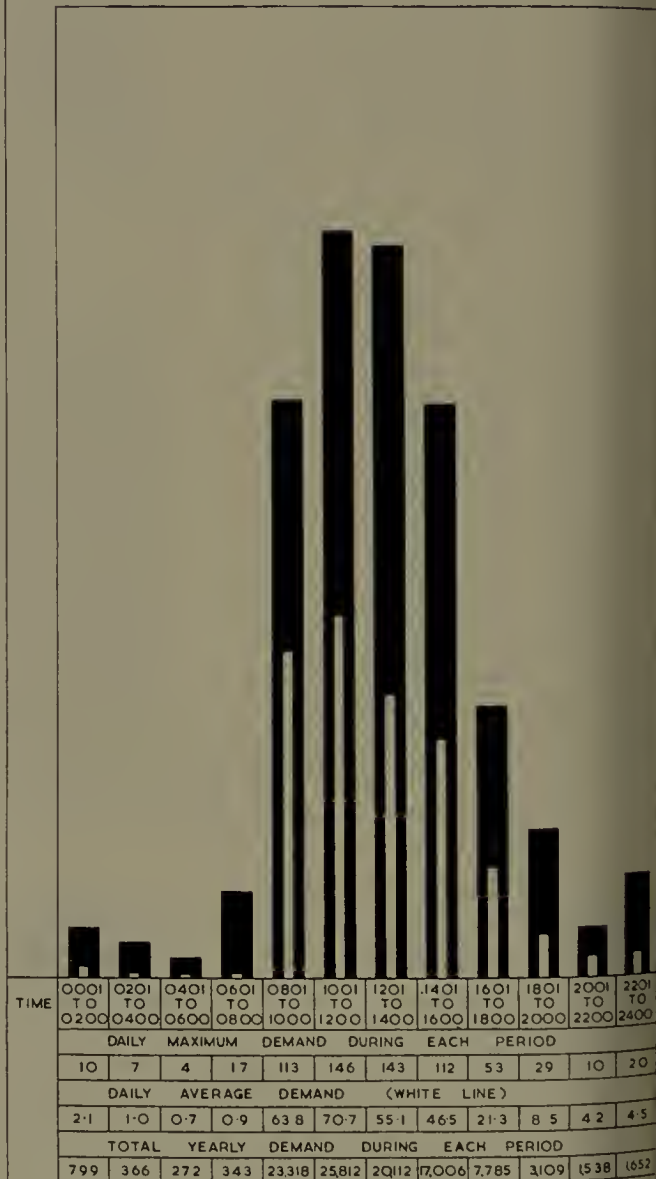


CHART SHOWING THE DAILY AVERAGE
DEMAND FOR AMBULANCE TRANSPORT
IN TWO HOURLY PERIODS DURING THE
24 HOURS OF THE DAY.



PREVENTION OF ILLNESS, CARE AND AFTER CARE (Section 28)

The Council's proposals approved by the Minister under Section 28 of the National Health Service Act provided for the taking over by the Health Department of certain services formerly available through the Warwickshire and Coventry Joint Tuberculosis Committee (now dissolved) and the former Social Welfare Department, for the correlation of such services with those of the Health Department and for their development and extension. Also for the continuance and extension if necessary of the then existing service whereby a selection of sick room appliances were available on loan, and for the introduction of a scheme for the provision of meals for sick and aged persons in their own homes.

The effect of these proposals over the decade since their adoption has generally been as follows :—

Tuberculosis.

The Health Committee is responsible for the provision of open air shelters, of supplementary milk, assistance in providing beds, bedding and personal clothing in appropriate cases and for the supply of sputum flasks and disinfectants as required.

Great importance is attached to the regular domiciliary visiting of tuberculous patients and the closest links are maintained by the department and the Chest Clinic to ensure necessary attention, help and advice being given to patients. Assistance to tuberculous patients regarding housing problems is still quite considerable and full and sympathetic consideration has been given by the Housing Superintendent in the allocation of better accommodation where and when possible.

There are four full time Tuberculosis Visitors on the Health Visiting Staff who do excellent advisory and environmental work in the city and maintain the closest liaison with the Chest Clinic. All applications for free milk are subject to enquiry by the Tuberculosis Visitors and authorisations are reconsidered quarterly.

Arrangements have continued for the past several years whereby the department sends, on the recommendation of the Chest Physician, a few patients suffering from tuberculosis to a private convalescent home on the Northumbrian coast which caters specially for these patients. Patients usually stay at the home for a few weeks, which is of considerable rehabilitative value to and much appreciated by them.

The provision of free milk to tuberculous patients has continued during the year as shown in the following table :—

No. of persons receiving milk at 1st January,	
1958 	328
No. of additional persons allowed milk during	
1958 	171
Total number who received milk during 1958	499
No. of persons receiving milk at 31st	
December, 1958 	316
Cost during year ended 31st December, 1958	£4,661 13s. 5d.

Occupational Therapy.

The year 1956 saw the beginning of the occupational therapy work in the department with the securing of the part-time services of an occupational therapist. At best, tuberculosis is a most depressing disease and occupational therapy is therefore of particular value to the domiciled patient in occupying his mind in creative work. Because of the nature of their disability, friendly visitors are far too infrequent at the homes of tuberculous patients and this form of therapy has been much appreciated since its inception.

A list of twenty-three crafts is available from which patients may choose one or more. Various crafts involving the use of remnants have reduced expenditure on some goods. More patients are now using knitting machines and additional crafts introduced during 1958 included musical boxes, the decoration of plain china and match box models : these were introduced especially for the benefit of patients confined to bed, since the materials are easily handled.

The work produced by the patients is invariably of a high standard and in many cases quite exceptional, and assistance is given to the patient where necessary in the sale of the finished articles.

The patients are very appreciative of the advantageous cost of materials, which are issued to them at purchase prices very favourable to the department.

The following figures give some indication of how the service functioned during the year ended 31st December, 1958.

No. of patients brought into scheme in 1958	...	113
No. of patients remaining from previous year	...	106
No. of patients who left scheme in 1958 :		
Died	... ..	4
Returned to work	... ..	130
Returned to hospital	... ..	—
No. of patients in scheme at 31st December, 1958	...	85
No. of visits to patients' homes	... ..	496
No. of patients visiting office (for materials etc.)	...	1632

Great credit is due to the Occupational Therapist and to her clerical assistant for the excellent results which have so far been achieved in this very worthwhile service.

Venereal Diseases.

Since the appointed day of the National Health Service Act the Health Visitors have continued special follow-up visits to defaulters in connection with venereal disease work and in co-operation with the treatment centre. During 1958 70 such visits were made.

Cancer.

At the request of and by arrangement with the medical staff of the Coventry and Warwickshire Hospital follow-up visits have also been made for some years to post operative cases with this complaint. In 1958 there were 65 visits made.

Meals for the Sick and Aged

The Mobile Meals Service was inaugurated on the 25th July, 1949. It was the first of its type administered entirely by a local authority. In the beginning approximately 40 meals a day were delivered, and by the end of 1949 the number had been stepped up to 74.

Mid-day meals are provided on five days per week (Monday to Friday) and delivery is effected by three specially adapted delivery vans manned by part-time personnel. The service began with certain original and novel features which, together with other modifications, have now tended to become somewhat standardised throughout the country, and make for easy handling of meals which are carried in special (individual portion) insulated food carriers, each carrier holding five two-course meals.

The plight of those people physically unable to prepare their own meals and who have neither relatives nor friends to do it for them is answered by this service, which continues adequately to justify itself on both health and social grounds.

Over the past ten years the service has been so extended in its take-up by the public, that compared with the average number of meals supplied per day in 1949 (74) the figure has now risen to 143, and in 1958, 10,000 more meals were supplied than in 1957.

The following details relate to the activities of this service in 1958 :—

Total number of meals supplied	...	...	36,369
Average number per day (i.e. five days per week)			143
Cost of purchasing meals	...	...	£3,012 7s. 8d.
Contributions from recipients	...	...	£174 14s. 0d.
Net cost	...	...	£2,837 13s. 8d.
Mileage run by three vans (approx.)	...	...	18,109
Total number of persons attended	...	...	328

Provision of Nursing Equipment and Apparatus.

A variety of sick room appliances are available to the public upon request at very reasonable hire charges from the Gulson Road Clinic. The items available are augmented from time to time as necessary and the following is a brief summary of some of them :—

Air rings, back rests, bed pulleys, bed cages, bed pans, bed tables, bronchitis kettles, douche cans, dunlopillo mattresses, commodes, crutches, feeding cups, hospital beds, invalid chairs (both indoor and outdoor), rubber sheets, spinal carriages, urine bottles, walking machines, walking sticks, water bottles.

HEALTH EDUCATION

(Section 28 NATIONAL HEALTH SERVICE ACT)

I have commented in the preamble to my Report upon this very important subject, and indeed, as year succeeds year, the need for the Health Department of a major local authority to have adequate provision for disseminating Health Education assumes wider and wider significance. The subject is one which impinges upon the varied work of the department at every point and is worthy of serious consideration and effective support.

To be really objective, it is essential that Health Education should be applied continuously in relation to the various aspects of a Health Department's services and this is only possible if sufficient means are provided in the shape of specific staff and equipment. It is hoped that the logic of this argument will shortly come to prevail.

Both lectures and a variety of informal talks upon a number of health subjects have been given by different members of the departmental staff and myself.

The Local Health Authority continues to make an annual grant to the Central Council for Health Education, which latter body provides a varied and most useful assortment of propaganda material. The Ministry of Health also provides a number of useful publications on occasion.

Cancer Education.

In 1957 suggestions were made to the Health Committee as to how best the problem of smoking and lung cancer could be brought to the attention of the widest possible public and generally it was agreed that the most effective means would be by a continuation of the approach through the Press and by the use of pamphlets and posters : as well as by approach to school-children in the formative years. In the latter connection consultation with the Director of Education took place and the assistance of head teachers was forthcoming in impressing the facts upon appropriate age groups : this has continued during 1958.

Throughout the current year departmental medical and nursing staffs have taken frequent opportunity in the course of their work in clinics and in the domiciliary sphere to give such advice as will be of help to those who are beset by personal anxieties in relation to the subject of Cancer.

During the decade under review expert talks have been arranged for the benefit of appropriate staff through the helpful co-operation of the Central Council for Health Education, or directly with other experienced speakers.

Cross Infection and the Antibiotics.

The subject of "Cross Infection" in hospitals has its public health angle and is one which has come to occupy much attention of recent years, and justifiably so. The problem is of moment in

Coventry, which is so urgently in need of greatly extended hospital provision of modern standard. Moreover, and as a corollary, the turnover of available hospital beds in the city is one of the highest in the country and the position therefore merits comment. Early in 1957 the Ministry of Health advised Local Hospital Management Committees to constitute "Cross Infection Committees" and such a one duly came to be set up in Coventry. The Medical Officer of Health or his deputy attends these meetings. A wide variety of factors affecting or likely to affect the hygienic and environmental conditions within local hospitals is taken into account and "Cross Infection," the *raison d'être*, has come under particular analysis. It is now well-known that some strains of micro-organisms (e.g., staphylococcal and streptococcal) have assumed resistance against certain antibiotics. This has presented a problem which in the flush of initial successes was not entirely anticipated: an understandable situation, for few are "gifted" with genuine clairvoyance and so many develop critical "foresight" after the event.

During the past hundred years and more, Hygienists and Sanitarians have waged a ceaseless battle with the adverse factors of man's environment as exemplified by squalor and virulent infection. The Public Health Service as we have come to know it to-day thrived under this original challenge and emerged as a great force to be reckoned with. Listerian aseptic techniques came by application to revolutionise hospital and environmental hygienic practices and the total saving of life achieved thereby was beyond credence.

But it should be remembered that in the immediate pre-antibiotic era and in spite of the most meticulous attention to hygienic detail, there were still infectious diseases and transmissible conditions which continued to cause great concern and loss of life: not least those accredited to staphylococcal and streptococcal organisms.

The advent of the antibiotics, several of which have immediately beneficial effect upon the course of disease, was a further major break-through in many respects, even allowing for the present anxiety caused by "drug resistance": this should never be lost sight of, and it would be churlish to do so. There are innumerable people (and many to come) who owe their lives to these wonderful preparations which have had tremendous impact in reducing death rates and conversely in extending the tenure of life for a *host* of people.

Those of us who are steeped in the usages of environmental hygiene must always continue to extoll its virtues and convert more and more people to that way of thought, for indeed prevention *is* better than cure. But let us not be deceived that such an approach is the panacea for the elimination of all infections. Research and preventive measures must and will continue to progress hand in hand, for neither the one nor the other provides a comprehensive solution in itself. The emergence of resistant strains of organisms is a setback, but one opines that the fruits of preventive research will counteract this trend in due course. Nevertheless, there must continue to be no vestige of withdrawal from the practising of basic

hygienic principles : such measures are the absolute foundations upon which other preventive measures must be built. Without such a basis, reliance upon other complementary measures alone could prove to be precarious.

Convalescence.

The City Council has accepted financial responsibility for hospital patients needing essential recuperative convalescence following their treatment. Such cases are recommended by the consultant staff and passed to the hospital almoners for allocation to acceptable convalescent homes.

All applications are, of course, scrutinised by the Medical Officer of Health prior to recommendation to the Health Committee.

Of the applications submitted 109 were approved and accepted as a charge on the Health Committee. The 109 cases were accepted for periods of 2, 3 or 4 weeks' convalescence in various seaside homes, and of these 7 were granted an extension of the original period based on further medical representations.

The cost of the maintenance of these patients to the department during the current year was £1,717 19s. 6d.

In 1958, travelling facilities were provided by way of rail or bus fares at a cost of £284 3s. 8d. ; 94 patients with 8 escorts were paid for ; the Education Committee refunded the Health Committee to the extent of £67 15s. 8d., for the journeys of 14 school children with 20 escorts.

In accordance with the authority contained in Ministry of Health Circular 85, travelling facilities were made available to relatives for the purpose of visiting patients in hospitals outside Coventry. 481 travel warrants were so issued to the relatives of patients throughout the year ; the cost amounted to £252 10s. 6d.

A comparison of the extent and the cost of these services in the last two years they have operated is as follows :—

	1957	1958
Applications for convalescence received ...	115	109
Applications for convalescence approved ...	115	109
Applications for extension	8	7
Cost of maintenance in convalescent homes ...	£1,293 7s. 3d.	£1,717 19s. 6d.
Travel facilities provided		
—No. of patients ...	124	94
Cost of such ...	£423 10s. 3d.	£284 3s. 8d.
Visiting facilities for relatives :—		
No. of patients visited	46	40
No. of travel vouchers granted ...	549	481
Cost ...	£314 10s. 7d.	£252 10s. 6d.

ACCIDENTS IN THE HOME

1958

Cases investigated	...	...	...	...	140
Cases admitted to hospital			...	...	56
Cases treated by Out-Patient Department					50
Cases treated by own doctor			...	...	13
Cases treated at home		...	...	...	21

Nature of Accident

Burns and scalds	...	...	...	...	37
Cuts and bruises	...	...	...	...	46
Head injuries, <i>Concussion</i>	...	...	...	...	5
<i>Fractured skull</i>			...	...	5
Other fractures	...	...	...	...	5
Poisoning	...	...	...	...	33
Miscellaneous	...	...	...	...	8
Deaths (<i>Coal gas poisoning</i>)	...	...	...	...	1

Of the 140 cases investigated during 1958, one fatality occurred from coal gas poisoning. A child had been left in a pram in the hall of a tenement building in the care of neighbours, and a gas leakage from a gas jet which had blown out caused asphyxiation.

Other cases investigated proved, once again, the great necessity for putting things out of the reach of young children, who are, by nature, very inquisitive.

Many falls resulted from climbing on chairs and onto tables, and several cases were recorded of children having climbed through bedroom windows and fallen to the ground. Fortunately, none of the cases investigated proved unduly serious.

Poisoning, once again, took its toll, due to ineffective labelling of bottles. In one case the father gave carbon tetrachloride instead of cod liver oil. Other poisons were not in poison bottles or adequately locked away and were given as other medicines. Sleeping tablets and tranquilisers left lying around were mistaken for sweets and taken by a number of children, causing much distress.

Pulling things from a table where the tablecloth overhung caused several scalds, varying in degrees.

Of all the accidents investigated there was only one which happened in a really poor home. All the other cases were in good homes but thoughtlessness rather than carelessness appeared to be the cause of most accidents.

One child had his eye badly burned by a cigarette, and another child swallowed a toy key.

The most distressing accident was caused by a celluloid hair band which was attached to a child's bonnet. When the bonnet was taken off and immediately put back onto the head, the hair band penetrated the eye, causing serious damage.

It would appear from the investigations made that greater emphasis should be placed upon the necessity for locking cupboards ; for putting away all tablets ; and avoiding over-hanging table-cloths. It would also help if all kitchens were larger than is popular at the moment.

HOME HELP SERVICE

(Section 29)

The Home Help Service in Coventry was already four years old on the Appointed Day of the National Health Service Act and at the end of 1948, some 90 Home Helps (full-time and part-time) were in employment (1946 = 16 Home Helps). The service had been provided for persons who were in genuine need through illness, infirmity and old age or because of recent or impending confinements.

The years between have produced a steady increase in the demands on the service and it is interesting to recall that whereas in 1949 the total number of visits to homes by the staff of this service was 5,924, the figure had risen by the 31st December, 1958 to 65,657. The development of the service revealed a growing demand for the part time assistance of Home Helps, and to meet this a greater proportion of part-time than full-time helps were employed.

In order to make for more satisfactory allocation and control of the Home Help Service, district offices under the immediate control of an Assistant Organiser were set up when and where opportunities offered, and in 1958 a further office was established at the Tile Hill Health Centre. Consideration is being given to the establishment of further district offices in the Wyken-Binley Road and Allesley-Coundon areas. When established, these additional offices will complete the decentralisation of the service, thus making it more convenient to the public and effecting a saving in Home Helps' time and travelling expenses.

The Home Help is issued with three sets of overalls yearly, and a distinctive badge is made available to them.

Induction Courses lasting two weeks have been held for several years. These preliminary courses have proved invaluable in selecting the right type of individual for the job. Four such courses were held in 1958 and 106 out of 121 applicants were successful, and taken on to the staff.

The staff engaged in this service at 31st December, 1958 was as follows :—

- 1 Organiser
- 6 Assistants to the Organiser
- 3 Clerks
- 255 Home Helps.

The following summary shows the work done during the year as compared with the previous year :—

	1957	1958
The total number of cases attended ...	1,235	1,454
Maternity cases	383	330
Illness and chronic sickness	285	275
Infirm and aged	530	793
Tuberculosis	5	16
Other cases	32	40
	<hr/> 2,470	<hr/> 2,908
Last year's applicants still on books ...	448	501
Applications	1,055	1,211
Advance applications for the next year ...	56	98
Cases actually assisted	1,235	1,454
Applications not pursued	210	211
Applications not eligible	8	5
Applications still on books at end of year...	501	560
Total number of visits to homes by home helps.	39,963	65,657

The figures for 1958 again record a steady increase in the demand for Home Helps, and it will be observed that over 500 more cases were dealt with than in 1957. There was acute pressure on the service during the winter months, due largely to the heavy incidence of sickness amongst old people.



The Home Help Service—A Helping Hand for an Elderly Patient

Attention is drawn to the very sharp increase in the number of visits to homes by home helps during 1958.

The Home Help Service has again responded well to the many calls made upon it and is to be congratulated for these splendid efforts.

The establishment of a Night-Care or "Sitters-in" Service (under Sect. 28 of the Act) on a limited scale during 1958, to supplement the existing Home Help Service by the provision of attendance during the night hours for seriously ill persons who are without relatives or friends to assist them, has proved very worthwhile. Additionally, the service is used to relieve, in exceptional circumstances, persons who already provide these services for their friends or relations.

The service commenced to operate on the 1st October, 1958 and seven cases were dealt with between that date and the 31st December, 1958.

MENTAL HEALTH

Section 51

Administration — Committee.

The Health Committee is responsible for all mental health work carried out by the local authority. By virtue of its approved scheme under Section 51 of the National Health Service Act, 1946, the duties of the authority in connection with the Lunacy Acts, the Mental Deficiency Acts, and the Mental Treatment Act, were consolidated into a single service in the Mental Health Section of the Health Department. Monthly reports on the work of the Section are submitted to the Health Committee.

Number and Qualifications of Staff.

The staff of the Health Department engaged on mental health work is: the Medical Officer of Health; the Deputy Medical Officer of Health; a Senior authorised Officer and Petitioning Officer: three duly authorised officers (1 male and 2 female). Assistant Medical Officers for related duties.

The two Occupation Centres have accommodation and are staffed as shown:—

	<i>No. Accommodated</i>	<i>Super- intendent</i>	<i>Deputy</i>	<i>Assistants</i>	<i>Trainee</i>
Burns Road	81	1	—	5	1
St. Peter's,	32	1	—	2	—
Yardley Street (opened 25.3.57).					

Co-ordination with Regional Hospital Boards and Hospital Management Committees.

Relations between the department, the Birmingham Regional Hospital Board, and the medical staff and psychiatric social workers

at the Central Mental Hospital, Hatton, continue to be satisfactory. Vacancies in institutions, either for temporary or permanent care of cases has continued to be extremely difficult and it has to be recorded that despite the Board's expressions of their sympathetic desire to help, nine urgent cases were awaiting vacancies at the year end. One of these cases had to be admitted to the Central Hospital, Warwick, as an expedient, because of his violent behaviour towards his mother. He is still there and the Board are unable to give any hope of an early vacancy for him in a mental deficiency hospital.

It is practically impossible to obtain vacancies for the helpless "cot" type of patient, the care of whom at home places so much strain on the parents. In this particular sphere thanks are due to the local paediatrician whose valuable help in providing temporary care from time to time for these patients in one of the children's hospitals is greatly appreciated by parents and mental health staff alike.

Considering the few applications for institutional care relative to the number of patients under supervision at home (287) it is regretted that the help so urgently needed is not readily forthcoming for those parents who seek it only because the care of such patients at home causes so great a strain on the family as a whole.

Supervision of Patients on Trial from Mental Hospitals.

Patients on leave of absence in the community from the Central Mental Hospital, Hatton, are kept under supervision by the psychiatric social workers from the hospital, between whom and my staff there is mutual helpfulness.

On Licence from Mental Deficiency Institutions.

At the 31st December, 1958, 15 patients (7 males and 8 females), were on licence and were supervised by the authorised officers from this department on behalf of the parent mental deficiency institution. During the year the licences in respect of 2 female patients had to be revoked. Nine of the patients on licence however, (5 males, 4 females) have been found employment and with the exception of one, all have progressed satisfactorily in their jobs, although it is necessary in most cases to maintain a close liaison with employers to ensure the continuity of employment when difficulties occur. The remaining 6 cases on licence were not employable and are in the care of parents or relatives at home. During the year as a result of a successful period on licence from institutions in the community, 11 patients were discharged from the Orders under the Mental Deficiency Act.

It is also the case that apart from the supervision of licensed cases in the community, a liaison is maintained with the Medical Superintendents of parent mental deficiency institutions which permits the friendly supervision of patients from outside areas on long leave of absence from those hospitals to relatives or friends in Coventry.

Duties Delegated to Voluntary Associations.

The local health authority fulfils all duties imposed upon it by Section 51 of the National Health Service Act, 1946 ; there is no delegation.

Training of Staff.

All the Duly Authorised Officers have taken the special course organised by the National Association for Mental Health, and each of them has had practical experience of their work for the past ten years.

Of the staffs of the Occupation Centres, two Superintendents and one Assistant are qualified and one Assistant is at present away taking the course for qualification under the N.A.M.H. scheme for Occupation Centre staffs.

Work in the Community.

(a) Under Section 28 of the National Health Service Act.

During the year out-patient electrical convulsive therapy has continued to be available at Gulson Road Clinic. This is given each Saturday morning by the medical staff from the Central Mental Hospital at Warwick, assisted by members of the Home Nursing Service. 542 persons (196 males and 346 females) had this form of treatment during 1958.

(b) Under the Lunacy and Mental Treatment Acts.

During the year 1958 the Authorised Officers were responsible for 1,108 visits to patients under the Lunacy and Mental Treatment Acts, and in the same period 644 mental treatment patients and 145 persons of unsound mind from the area of this local health authority were admitted to mental hospitals for treatment.

The figures for mental treatment cases show a decrease of 56 as against the figure of 700 last year. It is possible that this decrease could be accounted for in an increased number of admissions to Leigh House, but as this branch of the Central Hospital, Warwick, ceased to be designated as a mental hospital for the purposes of the Lunacy and Mental Treatment Acts on 1st July, 1957, details in regard to the number of admissions thereto are no longer available to us.

(c) Under the Mental Deficiency Acts, 1913-1938.

(i) *Ascertainment and Supervision.* During the year 1958, some 57 cases were referred from all sources (including those under the provisions of the Education Act, 1944, Section 57(3) and (5), and by police and courts), of which number 25 now receive supervision by the Authorised Officers. Most ascertainment examinations are carried out by the Deputy Medical Officer of Health.

The domiciliary visiting work in respect of 288 patients under the statutory supervision of the Local Health Authority has been continued. In the main, the close relationship between the patient,

the parent and the officer has been maintained and a number of the higher grade patients have been found employment. Wherever possible in the lower grade groups admission to one or other of the two existing occupation centres has been arranged though there are still 24 of these patients on the waiting list for admission. Assistance in obtaining employment has also been offered to patients coming out of institutions on licence to their parents and in a number of cases these patients have successfully held down their jobs.

(ii) *Guardianship.* At the 31st December, 1958, there were 7 patients under guardianship, to the guardians of 4 of whom weekly financial grants, varying from 15s. 0d. to 30s. 0d., were paid towards the cost of their maintenance at home.

(iii) *Institutional Cases.*

The assistance made available by the Health Committee whereby, in four instances during 1958, parents of restricted financial means were enabled to visit their defective children in hospitals situated a considerable distance from Coventry, has given immense satisfaction. The value to the patients of these visits has been emphasised many times by the hospital medical superintendents.

During the year 1958 the work done under the three relevant Acts was as follows :—

Lunacy Acts, 1890-1891.

Coventry Patients	Central Mental Hospital Warwick			
	Sec. 16	Sec. 11	Sec. 20	Total
Number of patients remaining in hospital on 31.12.57	377	—	2	379
Number of admissions from 1st Jan. to 31st Dec. 1958.	48	—	97	145
Number of discharges, including deaths from 1st Jan. 1958 to 31st Dec. 1958.	75	—	97	172
Number of persons of unsound mind remaining in Central Hospital on 31.12.58.	350	—	2	352

I am indebted to the Senior Psychiatric Social Worker attached to the Central Hospital for the following record of work amongst Coventry patients :—

1. (a) Total number of cases dealt with in 1958 ... 585
- (b) How many of these had been seen previously ... 193
- (c) Total number of all visits (home or authority) ... 538
- (d) Total number of interviews in O.P. clinics ... 364
2. Cases which involved four visits and more ... 43

Mental Treatment Act, 1930.

1. No. of patients in Central Hospital, Warwick, under this Act on 1st January, 1958	...	...	...	Voluntary	324
				Temporary	1
2. No. of patients admitted during 1958	...	...	...	Voluntary	638
				Temporary	6
3. No. of patients discharged, transferred or died...	...	...	...	Voluntary	572
				Temporary	5
4. No. of patients remaining in hospital at 31st December, 1958	...	...	...	Voluntary	390
				Temporary	2

The proportion of voluntary to total Coventry patients admitted to the Central Hospital continues to be well over 80 per cent. From the patients' point of view there can be no doubt as to the much more beneficial results achieved with willing patients seeking to be cured.

The close liaison continues between the department and the respective staffs in the departments of the Magistrates' Clerk and the Probation Officer.

Mental Deficiency Acts, 1913-1938.

Table showing Classification of all Mental Defectives on Register at 1st January, 1958, and how dealt with.

	In Institutions			Under Guardianship			Under Supervision in own homes			Grand Totals		
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Feeble-minded	74	84	158	2	1	3	32	61	93	108	146	254
Imbeciles ..	49	54	103	1	2	3	72	107	179	122	163	285
Idiots ..	17	16	33	1	—	1	10	5	15	28	21	49
Moral Imbeciles	2	1	3	—	—	—	—	—	—	2	1	3
TOTALS ..	142	155	297	4	3	7	114	173	287	260	331	591

Totals include 7 males and 8 females on licence from Institutions.

Of the total of 297 patients in mental deficiency hospitals at the end of the year, 70 were "informal" patients, their detention orders having been discharged as a result of Ministry of Health Circular 2/58 issued on 15th January, 1958, which was a direct result of the recommendations of the Royal Commission on the law relating to mental illness and mental deficiency that patients admitted to mental deficiency hospitals should, in all suitable cases, be received on an informal basis without using the procedures which authorise detention.

The most outstanding case dealt with under the Lunacy Acts during 1958 was that of a woman of 49 years who was brought to

the notice of the mental health section through the housing section of the City Treasurer's Department. A considerable number of visits was paid to this woman's home by the mental health officers during 1957 and up to July 1958 without any progress being made towards obtaining the necessary treatment for her. This was as much due to the husband's obstructive attitude as to the unwillingness of the patient to co-operate. The woman had chronic inflammation of both legs which were ulcerated, oedematous and suppurating, around which she had rags and newspapers which were dirty and evil-smelling. Her feet were so swollen that they were almost indistinguishable as such. Her surroundings were comfortless and disorderly, yet she was completely unaware of her plight.

She had refused treatment by her own doctor because she had an obsession about cancer, and believed that contact with anyone outside her own home might subject her to the risk of cancer. All articles brought into the house by her husband had to be put through a certain routine before she would touch them.

She had not been out of the house for many, many months, and refused to buy clothes or allow anyone to buy them for her in case cancer should be transmitted to her in that way. Her bodily condition was unkempt and filthy and she was completely unclothed except for a very dirty, disreputable raincoat tied round her waist with a piece of string. The smell emanating from her was nauseous in the extreme.

The state of the house itself was indescribable. What little furniture there was stood against the walls and although these was a bedstead and mattress, these had not been made use of at all. The woman slept on a piece of 3-ply board over two chairs and her husband on a pile of rags on the floor. The state of the kitchen was even worse. The table was littered with old bread and butter and what appeared to have been sandwiches made with bread and green soap. The floor was littered with orange peel. In spite of all the filth and manifestations of poverty there were hundreds of pounds in notes on the table, covered over with newspapers. (The money was later estimated by the police to amount to about £500).

Matters were finally brought to a climax in July, 1958, when the Housing Superintendent succeeded in obtaining an eviction order against the man and his wife. The husband then appealed for help in regard to his wife, and arrangements were accordingly made for the woman to be seen by a doctor and magistrates as a matter of emergency. In view of the known difficulties of the case the magistrate in question sought the help and advice of the magistrates' clerk, who was present at the inquiry. The husband became very difficult and abusive during the inquiry and the procedure was delayed whilst the assistance of the police was sought to restrain him. The patient was eventually certified and admitted to the Central Hospital, Warwick, where she co-operated extremely well, making rapid progress towards recovery. About nine weeks after admission she was regraded to the voluntary class and was still receiving voluntary treatment at the end of the year.

It is to be recorded that the magistrates' clerk in discussing the case afterwards, expressed great admiration for the nature of the work carried out by the mental health officers, and highly commended the patience and understanding of the particular officer concerned in handling the patient in such nauseating circumstances.

In addition to the above, nine patients were admitted to hospital for temporary treatment and care under the provisions of Circular 5/52 whereby patients or guardians having the domiciliary care of their mentally defective children can be afforded temporary relief from such harassing responsibility at times of family illness or other crises.

The number of registered mental defectives in the city (597) represents 2.1 per 1,000 of the population.

During the year 5 patients were admitted to a hospital for mental defectives and 2,011 domiciliary visits have been made by the Authorised Officers.

As suggested in Circular 28/54 of the Ministry of Health, certain outstanding incidents during the year are set out hereunder :—

During the year 2 male mental defectives appeared before the court and were sent to hospitals under Section 8 of the Mental Deficiency Acts : (a) 1 of these cases was charged with indecent assault, and (b) 1 with larceny.

- (a) 17 years old youth before the Court for indecent assault. (Two previous convictions : one in 1954 and one in 1957 for similar offences). A rather dull, shy boy, with a history of truancy during his two years on probation from 1954 to 1956. Was not notified as backward on leaving school at 15 years, but was recommended on two occasions when on remand for notification under the Mental Deficiency Acts. Had been employed for two years as a lorry driver's mate. The home environment was reasonably good, but the parents were inclined to be over-protective, and he was an only child. The magistrates felt that he required training in a hospital which catered for persons of low mentality, and an Order was made by them committing him to care at St. Margaret's Hospital, Great Barr, Birmingham. It is interesting to note, however, that his Order was discharged on the authority of the Board of Control within two months of the date of his admission.
- (b) 24 years old man before the Court for larceny (his sixth appearance in Court since 1955, on charges varying from larceny to housebreaking and indecent assault). A notified mental defective who had been a patient in Monyhull Hall Hospital in 1956, but who was granted a trial on licence to the care of his brother in 1957. Whilst on licence he was again before the Court, but the medical superintendent of the hospital from which he was licensed refused to have him

back and he was sentenced to three months' imprisonment. Whilst in prison he received his discharge from the Mental Deficiency Order. In 1958 he was again before the court for larceny ; was once more certified under the Mental Deficiency Acts and admitted under a Section 8 Order to St. Margaret's Hospital, Great Barr, Birmingham. This case also was discharged on the authority of the Board of Control within two months from the date of admission. He has since been before the Court on a charge of indecency but was bound over for a year. He has no fixed abode.

Of the cases on licence during the year, one case worthy of mention was that of a girl of 22 years who had been on licence from Coleshill Hall Hospital since January, 1958. Her potential so far as employment was concerned was excellent, but she was lazy and although found several good jobs, she left after only a week or so in any one of them. The home background was poor, and the patient's mother was unconcerned about the fact that her daughter did not keep her employment. When seen by the officer supervising the case she was always prepared to give a good account of her daughter's behaviour, even though it was evident that the girl's conduct left much to be desired. In November, 1958 it was learned that this patient had contracted marriage with a male patient who was also on licence from the same hospital. The man was not a Coventry patient. As a result of her association with this man, with whom she had apparently been keeping company for some months before marriage, she gave birth to a female child in December. Everything possible has been done to help these two young people to settle down to a happily married life, and it is hoped that they will eventually do so. Much hard work however has to be performed by the officer concerned before the hoped for result can be achieved.

It might suitably be mentioned here that the above is the type of case with whom it has become extremely difficult to deal effectively on licence. In most current cases discharge from the Order is effected in twelve months from the commencement of licence after which, in the main, supervision is not desired by the patient. Every branch of the social service is still required at some time to play its part unreservedly to help maintain these patients satisfactorily in the community.

Of the 28 cases (16 males, 12 females) reported by the Local Education Authority during 1958 under Section 57(5) after leaving school, there were only 4 (1 male, 3 females) in which the parents were willing for any further action to be taken in regard to ascertainment. All the cases in question have obtained employment and a discreet but unofficial eye is being kept on their progress.

During the year the Health Committee by resolution authorised the removal from the Register of Mental Defectives the names of 30 cases (8 males and 22 females) on the grounds that after some years of home supervision these were no longer in need of control.

Occupation Centres.

Burns Road.

This centre, originally designed for 60 places, was opened on 5th March, 1952. By the 31st March, 1958 there were 81 children on the register of the centre — 47 males and 34 females ; and the average daily attendance was 75.

The established training schedules were continued during the year although the senior group activities were based on a more adult approach, including laundry, vegetable growing and care of the grounds with an increase in the range of handicrafts. Both male and female groups were instructed in the preparation of simple meals and approximately every third week a senior group has cooked a mid-day meal for their own consumption.

A new innovation, the “ Tuck Shop ” has proved a great success in the training of money values and a number of children have gained the confidence to spend “ outside.”

The social club held on Thursday evenings now caters for both adults and girls and boys and is very popular, attendances ranging from 24 to 30 per session. The last hour of these evenings is devoted to adapted modern and square dancing.

A “ news letter ” has been published giving details of the centre’s aims and activities and has proved a useful bond between parents and staff.

Other activities during the year included parents’ days, display and sale of work, visits of interest, Christmas party, etc.

Yardley Street.

This temporary unit for 24 children was opened on 25th March, 1957 in an attempt to cope with a developing waiting list of young defectives. It is rented accommodation from the St. Peter’s Parochial Church Council and two large rooms of old school premises, with kitchen, toilet and cloakroom facilities have been put to good use. Mid-day meals are supplied by the School Meals Service.

The waiting list of admissions has continued to rise and by 31st December, 1958, 32 children were on the register at Yardley Street.

The curriculum consists of social training, hygiene, handwork, cookery, speech training, swimming and dancing and, with the higher grades, work with the three Rs.

During the year 1958 an open day was held which was well attended and at Christmas a nativity play was performed with extraordinary success. The Vicar of St. Peter’s Church is a regular visitor to the centre and his weekly short talks are eagerly anticipated by the children. Monthly social evenings have been held when parents and staff are able to get together on matters of mutual interest.

My thanks are offered to the Superintendents and their staff of both these centres for the excellent work which is being done for handicapped children and for the intense interest which they have in social developments at the Centres.

REMOVAL TO SUITABLE PREMISES OF PERSONS NEEDING CARE AND ATTENTION

Section 47 of National Assistance Act.

During 1958 it was necessary to invoke Section 47 of the National Assistance Act, 1948, as amended by Section 1 of the National Assistance (Amendment) Act, 1951, to secure compulsory removal to suitable premises of an aged woman.

A request was received from the City Police for Mrs. F. G. to be removed from her residence to a place where adequate care and attention would be available to her. Upon investigation it was found that Mrs. G. was aged, infirm and physically incapacitated and living in insanitary conditions, and was not able to devote to herself nor to receive from other persons proper care and attention.

Although it was cold weather there was no fire in the house and the woman was shivering uncontrollably, and as far as could be ascertained she had had very little food over the weekend and no fire for two or three days.

The old lady had been discharged from High View Hospital on the 5th November, 1957, after having been a patient for 13 weeks, and it was clear that she was in urgent need of readmission.

Despite repeated attempts by the woman's doctor, by relatives and neighbours, by members of my staff and myself to persuade the patient to enter hospital she refused to go, and it became necessary to invoke Section 47 of the National Assistance Act, 1948 and Section 1 of the National Assistance (Amendment) Act, 1951, for her compulsory removal. Application for an Order for her removal was made to a Justice of the Peace, who visited the patient and signed the Order for her immediate removal to High View Hospital.

The patient was admitted to High View Hospital on the 13th January, 1958 and a Magistrate's Order for an extension of the original Order was obtained on the 30th January, 1958. The patient was eventually discharged from Hospital on the 1st May, 1958, when various domiciliary services were invoked to enable her to remain at home.

There were one or two other cases of persons requiring care and attention who in the first instance refused to avail themselves of such facilities as the Health or Welfare Departments were able to provide or to make available, but eventually they were prevailed upon to enter suitable premises, without the necessity of invoking compulsory powers.

PUBLIC WATER SUPPLY

I am indebted to the Water Engineer and Manager for the following information as to the city's water supply :—

	1957	1958
Houses with water supply laid on ...	85,766	88,581
Houses supplied by standpipe or similar means	1,101	1,043
Population supplied direct	283,520	281,356
Population obtaining mains supply by standpipe or other means (not direct)	3,853	3,129
Total population supplied ...	287,373	284,485

The supply has been satisfactory both in quantity and quality for all essential purposes.

The appendix given below contains information as to the frequency of bacteriological and chemical examinations of water from the various sources of supply.

The waters are not liable to have plumbo-solvent action.

Chlorination is applied at all sources of supply but certain underground supplies are treated with a marginal dose only.

CHEMICAL AND BACTERIOLOGICAL ANALYSES

	<i>Samples from</i>	<i>Frequency of Examination</i>	<i>Laboratory</i>
Bacteriological Examinations	All underground supplies, Strensham, and bulk supply from Birmingham	Twice weekly	City Laboratories Service, Coventry.
		Fortnightly	Coventry Public Health Laboratory
	Strensham	Treated water Daily	City Laboratories Service Laboratory at Strensham
		All stages including inlet and outlet Bredon Reservoir —weekly	"
	Distribution System	8 samples each week	City Laboratories Service, Coventry.
Chemical Examinations	New & repaired mains, consumer complaints, etc.	As required	"
	All underground supplies, and bulk supply from Birmingham	Fortnightly	"
		Full chemical and mineral analyses —periodically	"
	Strensham	Treated water and all stages —partial analysis —daily	City Laboratories Service Laboratory at Strensham
		Full analysis, water sampled at Meriden —weekly	City Laboratories Service, Coventry.
		Full analysis, all stages through works —monthly	"

COVENTRY CREMATORIUM

The Canley Crematorium, which is owned and operated by the Parks and Cemeteries Department of the Corporation, continued efficiently to fulfil its role in the hygienic disposal of the dead. The Medical Officer of Health as Medical Referee has the assistance of the Deputy Medical Officer of Health and one of his senior Medical Officers as Deputy Medical Referees.

The figures for 1958 were as follows :—

	1958.	1957.	1956.	1955.	1954.	1953.	1952
Total							
cremations	1,679	1,688	1,651	1,563	1,394	1,250	1,105
Coventry							
residents	814	734	735	845	678	702	658
Residents of							
other areas	865	954	916	718	716	548	447

It is again the fact that for 1958 the number of cremations taking place at the Coventry Crematorium outnumbered (as in 1957) the number of burials occurring in the city.

HOSPITALS

The hospitals and annexes in the city under the control of the Hospital Management Committee (Group 20) of the Birmingham Regional Hospital Board remain as follows :—

The Coventry and Warwickshire Hospital
 Gulson Hospital
 Whitley Hospital
 Paybody Orthopaedic Home and Clinic

The Board issues its own printed report.

SUPERANNUATION EXAMINATIONS

Medical examinations for superannuation purposes, initial entry into Corporation service, prolonged sickness, retirement, etc., commenced in the Health Department on 10th November, 1952, and from the date onwards, 6,730 examinations have been carried out by the departmental medical staff, as follows :—

	11.11.52 to 31.12.53	1954	1955	1956	1957	1958
SUPERANNUATION SCHEME.						
Entrance into Superannuation Scheme	335	360	534	606	552	374
Prolonged sickness or retirement	30	34	29	23	16	43
Fitness to resume work ..	11	27	8	31	28	9
NON-SUPERANNUATION. ..						
Initial entrance examination to Transport Department ..	574	577	640	484	327	257
Prolonged sickness or retirement	42	23	11	5	—	1
Routine re-examinations ..	31	50	27	43	57	107
FIRE SERVICE EXAMINATIONS.						
Admission to Fire Service Pensions Scheme	48	93	9	20	18	23
Prolonged sickness or retirement	4	5	1	3	4	1
Other medical examinations for non-superannuated posts, etc.	1	10	17	18	13	3
SUNDRY.						
Sundry and other examinations for non-superannuated posts in Corporation Service	2	2	9	4	16	100
TOTALS	1 078	1 181	1 285	1 237	1 031	918

The above takes no account of 230 Medical Statements dealt with in respect of persons deemed not to require a medical examination since the questionnaires were introduced in June, 1958.

STAFF CHANGES

The staff record shows the following changes during 1958 :—
Left the Service :—

5 Assistant Medical Officers, 5 Health Visitors, 3 Midwives, 1 Assistant Supervisor at Yardley Street Occupation Centre and 3 School Nurses, 1 Occupational Therapist, Burns Road Occupation Centre Supervisor.

Joined the Department :—

4 Midwives, 6 Medical Officers, 3 Assistant Supervisors of Occupation Centres, 2 Temporary School Nurses, 1 Handicraft Instructress, Burns Road Occupation Centre Supervisor.

HOUSING ACT 1957 — OVERCROWDING

(a)	(i) Number of dwellings overcrowded at the end of the year	...	...	...	...	...	...	126
	(ii) Number of families dwelling therein	...	...					183
	(iii) Number of persons dwelling therein	...	...					915
(b)	Number of new cases of overcrowding reported during the year	...	...	...	...	...	...	168
(c)	(i) Number of cases of overcrowding relieved during the year	...	...	...	...	...	...	329
	(ii) Number of persons concerned in such cases	...						1,316
(d)	Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	...	...	...	...	...	...	—

PUBLIC HEALTH INSPECTION SERVICE

From the Report of the Chief Public Health Inspector

R. WILLIAMS, O.B.E., D.P.A., F.R.S.H., F.A.P.H.I., M.I.P.H.E.

Deputy Chief Public Health Inspector...	...	...	E. A. Johnson, M.A.P.H.I.
Senior Food and Drugs Inspector			H. Ellis, M.A.P.H.I.
Senior Meat Inspector	...	...	L. Vivian, B.Sc., M.A.P.H.I.
Divisional Inspector (South)	...	...	T. E. Willmott, M.A.P.H.I.
Divisional Inspector (North)	...	...	D. C. Norcliffe, F.A.P.H.I., M.R.S.H., M.I.P.H.E.
Senior Housing Inspector	...	...	R. D. Hayne, M.A.P.H.I., A.R.S.H.
Food and Drug Inspectors	...	...	H. Lenton. D. H. Evans. B. McCutcheon.
District Food and Meat Inspectors			P. J. Wightman. J. E. Saunders. G. L. Morris. J. Lowe. J. E. Smith. R. K. Crow. W. D. H. Kear. L. Himsworth. J. Marshall.
Assistant Housing Inspectors	...	...	B. A. Seal. D. L. Miles. E. Weare. D. W. Wrighting.
Student Inspectors	...	...	A. G. Harrison. D. J. Wilson. E. W. Wright. J. B. Simpson. J. P. Higgins. J. W. Stranks.
Disinfector	...	...	E. J. Gibson.

Clerical Staff

Chief Public Health Inspector's Secretary	...	...	Mrs. M. C. M. Warren.
Shorthand Typist	...	...	Miss P. A. Baughen.
Group Clerks	...	...	Miss E. M. Brown. Miss L. A. Wheatley. Mr. J. L. Green.

Rodent Control Staff

Rodent Officer	W. J. Brown.
Rodent Operatives	...	...	A. Baker. W. Head. T. F. Brown.

Examination Successes and Awards This Year

1. R. K. CROW, District Inspector, was created a Fellow of the Association of Public Health Inspectors for his thesis on "Design of Slaughterhouses".
2. D. J. WILSON, Student Inspector, obtained his Ordinary National Certificate in Building.
3. A. G. HARRISON, Student Inspector, obtained his Ordinary National Certificate in Building.

Commenting upon the work of the Public Health Inspectorate during 1958, details of which follow herein, the Chief Public Health Inspector acknowledges the most helpful assistance given by the Housing Superintendent and his staff in relation to the re-housing of families displaced through Slum Clearance. Attention is drawn to a possible relationship between the continuing incidence of *cysticercus bovis* and the feeding of cattle on pastures contaminated by infected sewage.

In relation to other matters, the Chief Public Health Inspector comments as follows :—

... “The tempo of the slum clearance work has increased very rapidly this year, and the end of the five-year programme is already in sight. A great deal remains to be done to complete the final phases, for until all these outworn properties are demolished and the sites cleared, the evidence of what has been achieved will not be visible. Nevertheless, before that time the people living in these sub-standard conditions will have been suitably rehoused. Subject to the staff position being maintained, it will then be possible to devote more attention than at the present time to a general housing survey for the purpose of reconditioning and repairing of houses apart from the works now being carried out by virtue of the Rent Act and Public Health Act.

“ ‘ In-filling ’ of vacant sites, while more costly to build per house than large scale estates, can also serve social needs by enabling at least some people to remain in their own locality ; proposals for the building of flats on sites of clearance areas are very welcome for that reason alone. Furthermore, building on these isolated sites will prevent the recurring troubles experienced through the dumping of broken down cars, rubbish and litter on such spaces. Corporation housing schemes were seriously affected by subsidy changes, and but for the outstanding progress in Council building in previous years, might have greatly retarded the speeding up of slum clearance in the city.” ...

... “Food and drug work has kept pace with the many changes in the pattern of sophistication. Reference is made to the increase in labelling offences ; indeed, half of the samples found to be unsatisfactory relate to such cases. Television advertising material was amended in two instances where the “ blurb ” or “ patter ” was thought to be too far from the actual facts concerning the composition of the products. The assistance provided by the Corporation’s own Public Analyst is invaluable in this and other work. The report on this section of the work sets out in detail the result of each case, and it is accepted that where enforcement of the Food and Drug law is vigorous, there will be cases lost through technical or legal niceties. Such is the thoroughness with which all cases are prepared that failures are few. In one instance at least, the Chairman of the Bench publicly praised the Department for the manner in which the case was prepared. At times the fines imposed for offences under the Food and Drugs Act and public health law generally tend to support the impression that magistrates themselves do not consider such offences

very serious. Moreover, the absence of any sign of uniformity of application of penalties makes the Department quite uneasy. An offence which merits and receives a £20 penalty for one person one week will be rated at £2 for somebody else the following week. Public Health Inspectors do not seek "reasons" for prosecutions, on the contrary, they use every effort to achieve the right standards without recourse to legal proceedings. Nevertheless, occasionally, when such proceedings are taken, one would imagine the Inspector was the villain of the piece ! None of us should lose sight of the fact that the public has a right to be, and expects to be, protected.

From the large number of samples taken as a check on the quality of the milk supply, it will be seen that in Coventry there is nothing to be concerned about. Indeed, the national campaign in encouraging the public to "Drink a Pint of Milk a Day" is of little importance here, since the milk consumed in the city averages out as a pint per person per day. The standard of processing plants in the city is maintained at a very satisfactory level. Untreated milk forms a very small proportion of the total milk drunk in the city.

The efforts of the Inspectorate in connexion with ice cream production over the past years appear to have made a considerable impression. The statement on this section of the work points out that there were only six unsatisfactory samples, which is the lowest number of samples failing the standards since the Regulations came into force in 1947.

Meat inspection would seem to be a far cry from the subject of sewage disposal, yet the continued rate of incidence of cysticercus bovis demonstrates a close relationship. If cattle are fed on pastures contaminated by infected sewage, then the detection of carcasses infested with the parasitic cysticercus will remain a frequent event. A more positive attempt to break the chain of infestation should be possible at the production end. No doubt, with increased attention to sewage disposal schemes in the country generally, the hidden benefit of less infested cattle will become a possibility.

Eradication of bovine tuberculosis is proceeding apace, and the Ministry of Agriculture, Fisheries and Food, together with their field officers, are to be congratulated on the success of the scheme. As is seen in the detailed report on meat inspection, there was not a single case of congenital tuberculosis in calves discovered at the abattoir this year. Meat Inspectors play an important part, not only in the protection of the public health, but also in the contribution they make towards improvement in animal health through their co-operation with the veterinary officers of the Animal Health Division of the Ministry.

Lack of hygiene in slaughterhouses has long been the target of criticism, not only by the Public Health Inspector, but also by food handlers, particularly butchers. It would be completely futile to deny that a major part of such criticism is justified. Fortunately, changes in Regulations embodying standards of equipment and

technique will go far to remove the grounds for complaint. Abattoir and slaughterhouse work presents many difficulties to be overcome if full hygienic practices are to obtain. Nevertheless, with proper facilities, equipment and goodwill on all sides, a high standard of hygiene is possible. Coventry's abattoir has been regarded as one of the best in the country, but to maintain such a status in the future, a considerable amount of money will need to be spent to bring it into line with the future standards.

Nation wide concern has been expressed at Ministry level and in the Houses of Parliament concerning the question of one hundred per cent. meat inspection, that is, that every carcase slaughtered for human consumption should be inspected by a suitably qualified officer. In Coventry, by working a shift system, the public are ensured of full protection, since every carcase, including its offal, has to pass through the inspection service provided.

A significant feature of the year under review is the coming into operation of sections of the Clean Air Act, 1956, relating to dark smoke emission, the grit and dust from furnaces, railway engines, vessels and some Crown premises. Limits for permitted emissions of dark smoke operated from the 1st June, and there is no doubt that this legal sanction will assist the Department to take a further step forward in the campaign for clean air. Smoke control areas, determination of chimney heights, new installations, all bring problems which have to be overcome if the city is to proceed towards the modern conception of control of man made atmospheric pollution.

Valuable data is being collected from the wide coverage of atmospheric pollution recording stations now existing in the city. This information might prove of the utmost use in respect of a pollutant which is often reported in the press — radioactive contamination. Whatever Central Government may do in this connexion, it cannot be other than helpful to be able to measure changes in radioactive levels locally in future years.

The citizens of Coventry have been most co-operative in assisting the Inspectorate to carry out the necessary surveys in order to work out proposals for smoke control areas. One of the main obstacles to a rapid survey is the vast number of houses which are closed during the daytime as the occupiers are at work. Evening visits, therefore, figure more largely in the work of the Coventry officers than might be the case in other areas. The interest displayed by citizens when the officers visit their homes is most encouraging, and augurs well for the introduction of smoke control areas."...

WORK OF THE DISTRICT INSPECTORS

	Dec. 1957	Dec. 1958
DRAINAGE AND PAVEMENT		
Drains opened and cleansed from obstruction	602	763
Drains provided with efficient traps	—	—
New Drains, inspection and intercepting chambers provided	64	119
Drains relaid or repaired	114	188
Soil pipes and ventilating shafts improved or repaired ...	34	52
Rain water pipes disconnected from the sewer	1	2
Courts and back yards paved and repaired	7	32
Sink drains disconnected from the sewer	—	2
DWELLINGS		
Floors of dwellings relaid or repaired	118	161
Dilapidated walls and ceilings repaired	120	203
Damp walls—Damp courses inserted	16	24
Repointed or cement rendered	165	204
Roofs repaired and made weatherproof	199	303
Dangerous stairs repaired	9	12
Additional windows provided and others repaired and made to open	209	346
Defective guttering repaired	181	289
Houses provided with food stores	16	2
Existing pantries provided with external ventilation ...	—	—
Sculleries provided or reconstructed or enlarged	—	—
Wash houses provided	—	—
New waste pipes provided and others repaired	48	85
New sinks provided	42	33
Foul cellars cleansed and defects in drains remedied ...	—	—
Houses limewashed and cleansed	—	—
Houses cleansed after infectious disease	—	—
Verminous houses and furniture disinfected	126	138
Additional water closets provided	14	11
Water closets reconstructed	13	63
Water closets repaired and limewashed	—	—
Water closets provided with new pedestals	143	156
Water closet pans replaced with pedestals	—	—
Defective joints in flush pipes repaired	42	58
Foul water closet basins and traps cleansed	—	—
Defective water closet cisterns repaired	144	166
New flushing cisterns provided	84	89
Urinals cleansed and reconstructed	—	—
Urinals abolished	—	—
PRIVIES, CESSPOOLS, ASHPITS AND DUSTBINS.		
Cesspools abolished	14	28
Offensive privies or pail closets converted into water closets	1	24
Offensive privies or pail closets abolished	14	10
New water closets erected in place of above	14	10
Houses provided with sanitary dustbins	73	116
VARIOUS.		
Nuisances from animals kept abated	2	16
Offensive accumulations removed	108	189
Courts and backyards cleansed by tenants	2	14
Gipsy tents and caravans removed	14	19
Dairies reconstructed or improved	—	5
Water supply—additional taps provided	2	1
Polluted wells dispensed with	—	—
Town water supplied in place of well water... ..	—	—
Offensive ditches cleansed	2	9
Miscellaneous	1011	1368
Improvements effected at factories	19	55
Improvements effected at shops and food premises ...	272	438
	<hr/> 4059	<hr/> 5803

Summary of Inspectors' Work

IN CONNECTION WITH THE SUPPRESSION OF NUISANCES FOR THE PAST TEN YEARS.

	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	Totals.
No. of drains opened and cleansed from obstruction ..	1380	1632	1407	977	1139	975	1010	978	602	763	10,863
" drains provided with efficient traps ..	45	41	46	18	1	5	9	—	—	—	165
" new drains provided to premises ..	93	70	97	54	175	234	77	160	114	188	1,262
" sink drains disconnected from the sewer ..	1	2	12	8	1	2	7	1	—	2	36
" floors and walls of houses repaired ..	1392	1059	1068	912	810	579	583	347	299	389	7,438
" new sinks provided and others repaired ..	54	31	52	40	6	—	20	24	42	118	387
" roofs of houses repaired and made weatherproof ..	574	472	468	390	434	282	406	259	199	303	3,787
" defective spouts repaired ..	385	295	389	390	535	372	304	231	181	289	3,371
" houses limewashed and cleansed ..	19	2	7	7	—	—	—	—	—	—	35
" houses cleansed after infectious disease ..	—	—	—	1	—	—	—	—	—	—	1
" offensive privies or pail closets converted into water closets ..	17	33	31	17	38	—	1	6	1	24	168
" offensive privies or pail closets abolished ..	17	13	14	8	28	5	4	—	14	10	113
" new water closets erected in place of above ..	20	13	14	8	27	5	6	—	14	10	117
" additional new water closets provided ..	33	15	25	29	59	186	25	18	—	11	401
" water closets provided with new cisterns ..	84	66	81	70	15	13	33	85	84	89	620
" " " pedestal pans ..	222	166	181	136	109	134	129	201	143	156	1,577
" foul water closet drains cleansed ..	19	11	12	14	8	3	7	3	—	—	77
" defective water closet cisterns, etc., repaired ..	321	152	202	159	213	256	163	209	144	166	1,985
" sanitary dustbins provided to dwelling places and other premises ..	385	271	184	35	40	149	181	123	73	116	1,557
" urinals cleansed, repaired and reconstructed ..	8	1	2	1	—	—	—	—	—	—	12
" courts and backyards paved and repaired ..	41	32	42	12	44	27	6	13	7	32	256
" nuisances from animals kept, abated ..	29	31	12	41	18	10	1	—	2	16	160
" offensive accumulations removed ..	240	406	122	91	144	97	202	87	108	189	1,726
" cases of overcrowding dealt with ..	56	—	14	—	8	2	—	—	—	5	85
" miscellaneous sanitary improvements effected ..	2908	2691	2675	2144	1876	1310	1139	2130	1951	2927	21,751
	8,343	7,505	7,157	5,562	5,728	4,646	4,313	4,875	3,978	5,803	57,950

Summary of other Miscellaneous Work

FOR THE PAST TEN YEARS

	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
No. of visits and revisits to premises	44251	50673	58851	45825	36988	33080	33785	36684	28260	36438
“ drains tested	434	416	391	306	217	111	291	832	268	401
“ visits respecting infectious diseases	373	407	632	560	446	194	312	1486	214	162
“ notices issued for abatement of nuisances including informal and statutory	2973	2196	2066	1675	2089	1942	2030	1856	1537	1729
“ statutory notices not complied with at the close of the year	8	6	20	16	35	88	54	113	37	76
“ summonses issued for non-compliance with notices served to abate nuisances	—	1	10	12	9	12	11	9	15	24
“ registered premises under supervision	2529	2438	2644	2813	3519	3035	3107	2907	2084	3265
“ visits paid to registered premises	5435	8265	9201	10410	3030	2658	3115	1505	1521	2588
“ references to other Departments	1592	1105	1361	1656	1341	5857	6838	5452	5020	5670

WORK OF THE DISTRICT INSPECTORS

Summary of Inspectors' Work

Summary of other Miscellaneous Work

ABOLITION OF CESSPOOLS—DRAINAGE

The provision of main drainage facilities to all dwelling houses and other properties within the city is the constant aim of the Public Health Inspectorate. Where a public sewer is available, every encouragement is given to property owners to take advantage of the benefits to be obtained. The ideal would, of course, be first to provide the public sewer, and then follow with building development, but this is not always the rule. While this has been achieved in full measure with the many housing estates which typify the growth of the new city, the demands of the speculative builder are sometimes in advance of the necessary sewer extensions.

The outlying area of Brownhill Green, consisting of a mixture of smallholdings, old properties, and some which are comparatively new, does not enjoy the public health environment to be found in other districts which are sewered. Nevertheless, the rural surroundings associated with this area have attracted building development, and additional dwelling houses have now been added to those already in existence. Drainage of domestic sewage into cesspools or septic tanks is, in consequence, a general feature of the standard of sanitation which prevails. Serious public health nuisances are unavoidable from time to time as a result of sewage disposal methods of this character. A comprehensive report embodying detailed information obtained from a survey of the area made during the year was submitted to the Health Committee with recommendations for the sewerage of the whole area as the best practical solution to this problem. A main sewerage scheme in this connection is contemplated as soon as circumstances will permit. A group of dwelling houses and detached bungalows situated in Coundon Green were also the subject of negotiations for the abolition of cesspools and septic tanks. Meetings with the respective owner-occupiers were attended in conjunction with representatives of Corporation Departments concerned in the project. It is anticipated that the combined scheme of main drainage agreed upon will be completed in the near future.

The progress of the Inspectorate in this sphere of environmental hygiene is dependent upon many factors. The programme of vast reconstruction, together with the extensive domestic and industrial development put into effect in post-war years, have imposed exceptional demands on the main sewerage system of the city. These in turn have made heavy claims upon the financial resources of the local authority, so that, in the natural order of things, the advance towards a healthy environment throughout the city conforming with modern sanitary practice will of necessity be related to other urgent commitments of the City Council.

Pending the provision of main drainage, if everyone installing a cesspool observed

(a) the Building Byelaws which do not permit overflows, and

(b) constructed the cesspool of suitable size for the type of premises which it is intended to serve,

then many of the nuisances associated with this method of drainage would not arise. Examples taken from the survey illustrating these points relate in one instance to a cesspool which has a known drainage capacity of twelve days, but has not been emptied since the occupation of the dwelling house commenced three years ago. In another instance it was found that a cesspool having a drainage capacity of approximately eight days has been emptied twice during the past two years. It is, of course, appreciated that with strict adherence to proper constructional requirements, the cost of frequent emptying of the cesspool would have to be faced.

SANITARY PROVISION AND REFUSE DISPOSAL

The estimated number of sanitary conveniences, privies and cesspools existing at the close of the year is shown below :—

	Dec. 1957	Dec. 1958
Number of water closets in houses, institutions, schools, factories, etc.	118,147	121,224
Number of privy closets	75	75
Number of pail closets	238	204
Number of cesspools	318	290

Refuse collection and disposal are carried out under the direction of the City Engineer. Most of the refuse is disposed of by controlled tipping, the remainder being destroyed by incineration at the city's refuse destructor. The quantity of refuse collected during the year was 77,006 tons : of this quantity 58,992 tons were disposed of by controlled tipping, and 18,014 tons disposed of by incineration. Trade refuse delivered by traders during this period amounted to 2,422 tons, of which 629 tons were incinerated, and 1,793 tons disposed of by controlled tipping.

The progress achieved during the year included the conversion of twenty-four privy or pail closets into water closets connected to the main drainage system, and the abolition of ten privies or pails for which ten water closets were provided. Twenty-eight cesspools were also abolished.

In addition to the above sanitary improvements, the sewer extension in the Shilton Lanc area enabled the local Education authority to abolish sixteen pail closets and one large cesspool at Eburne School. Adequate water closet accommodation and provision for personal hygiene is now installed for both pupils and staff.

DUST BINS

... "The provision of dust bins to private dwelling houses is effected through the discretionary powers contained in Section 75 (i) of the Public Health Act 1936 as amended by Section 8 of the Local Government (Miscellaneous Provisions) Act 1953.

During the year seventy-one statutory notices were served upon owners of dwelling houses in respect of the provision of adequate dust bins for the proper storage of domestic refuse. None were served on occupiers for that purpose during the period under review.

Dust bins were supplied by the Local Authority in default of the owner in four instances.

The service of refuse collection and disposal from private dwelling houses is carried out free of cost other than a rate charge by the Local Authority in every detail except one ; that is the provision of the dust bin. A considerable amount of time and effort is devoted by the inspectorate in visiting and reporting upon properties which are in need of adequate dust bin accommodation. Moreover, in every instance, both landlord and tenant are supplied with a questionnaire seeking information in relation to the property concerned. These they are requested to complete and return so that the Health Committee may be aware of all the facts in the exercise of their discretionary powers under the provisions of Section 75 (i) of the Public Health Act 1936 in regard to the provision of the bin. In default of compliance with the statutory notice, which is authorised to be served upon the landlord or tenant, as the case may be, a dust bin of approved size and construction is supplied by the Local Authority."...

VERMINOUS PREMISES

The Public Health Inspectorate dealt with one hundred and thirty-eight cases of vermin infestation during the year. This represented an increase of 9·5 per cent. on the number of infestations dealt with during 1957.

The bed bug was the pest requiring most attention, and complete disinfestation was carried out in each instance. The insecticides used by the Department contain D.D.T. and Gammexane in liquid form or generated as a residual smoke. The human flea (*Pulex irritans*) also called for some attention and was effectively treated.

The demand for the services of the Inspectorate to deal with infestations of insect pests other than the bed bug and flea showed a marked increase over the previous year. These included cockroaches, ants, wasps, crickets, flies, woodworm, mosquitos and mites. In this connexion four hundred and one infestations were treated. Much attention was again given to the incidence of the German Cockroach (Steam Fly) found to be infesting canteen food kitchens. Successful treatments were carried out in every instance by the use of liquid insecticides and dusting powders containing D.D.T.

PIG KEEPERS' PREMISES

...“No applications were received during the year from persons proposing to keep pigs in private or allotment gardens. Thirty-five inspections of existing pig keepers' premises were made by the inspectorial staff. Particular attention was given to the premises of one established pig keeper in the City following complaints received during the period under review. Pig keeping on a fairly large scale, both breeding and fattening, has been carried on for many years. The sties are sited along the outer boundary of a small orchard, situated beyond the rear gardens of a row of terrace houses which, until recent years, enjoyed surroundings of a rural character. The expansion of municipal housing development has now urbanised the district, and the piggery is no longer in an isolated position. New dwelling houses, little more than the width of a street distant from the sties, are occupied by residents unused to the keeping of pigs. Odours, noise, and nuisances arising from the storage of manure, became the subject of complaint. Representations by the Department minimised the extent of the pig keeping, and regular and frequent removal of manure was required to be maintained. The premises were under observation at the year end.”...

...“The up-to-date slaughtering facilities at the public abattoir are available to all who have food animals for slaughter. Private pig keepers are given every encouragement to use them and several cottagers' pigs were prepared for food during the year through the facilities offered.”...

REFERENCES TO OTHER DEPARTMENTS.

The Chief Public Health Inspector Comments as follows :—

...“It is always a pleasant duty to place on record the cordial relations which exist between the various departments and the Public Health Inspector's Department in connexion with the many and varied references necessary for the proper administration of the sanitary services.

A total of seven hundred and fifty-nine references were made during the year to the City Engineer, City Architect, Housing, Parks and Education Departments, Water Engineer, City Estates Surveyor, Children's Officer, and Welfare and Pensions Service.

In addition to these, searches were made in respect of four thousand, nine hundred and eleven properties for the Town Clerk's Department under the Land Charges Act, 1925.

New legislation necessitated many forms and other stationery, for which a special word of thanks is due to the Printing and Stationery Department for the expeditious and efficient manner in which these needs were met.”...

HOUSING

The report is mainly one of statistical progress achieved in the city's slum clearance projects embodied in the five years' programme. In addition, however, the year under review has seen the building up of the evidence necessary to proceed with the making of Clearance Orders in respect of the outstanding Clearance Areas of those declared en bloc in the previous year. In the process of this preparatory work it was found that the voluntary demolition of certain properties and alterations in street numberings necessitated the revision of twenty-four Clearance Areas so declared. The re-submission of these areas to the Health Committee in an amended form, which included the making of new boundaries and amalgamations, resulted in the declaration of fifteen Clearance Areas in place of the number originally declared and revised.

Two Clearance Orders, affecting two hundred and sixteen unfit dwelling houses, seven of which incorporated shops, were submitted to the Minister for confirmation. Objections from the owners were received in respect of fourteen properties included in the Orders. Statements of the principal grounds as to unfitness were prepared and served upon the objectors, copies of the statements being submitted to the Minister as required by the provisions of the Housing Act, 1957. Subsequently six of these objections were withdrawn and notification of the local public inquiry was received in respect of the eight objections which were sustained. The public inquiry was awaited at the year end. In connexion with the two Clearance Orders claims under Section 60 of the Act for payments in respect of well maintained houses were made in seventy-five instances.

One Clearance Area, containing three unfit dwelling houses was made the subject of a Declaration of Unfitness Order under the Town and Country Planning Acts. The Order was submitted to the Minister, together with a statement of the principal grounds as to unfitness, prepared by a senior member of the staff who is a specialist on housing matters in relation to public health. The statement was accepted and the Order confirmed without modification.

Seven "Individual Demolition Orders" were made during the year relating to dwelling houses which were incapable of being rendered fit for human habitation at reasonable expense, and forty-two voluntary undertakings were given by owners in respect of unfit houses in anticipation of demolition or closing orders.

Demolition of unfit properties has proceeded, and one hundred and forty houses in Clearance Areas, seventy-eight individual unfit houses and ten houses included in Unfitness Orders were so dealt with.

Applications for grants towards the improvement of houses under Part II of the Housing Act, 1949, continued to be made, and in this connexion one hundred and eighty-four houses were inspected as to their suitability to qualify for the grant, and in only one case was it not possible to recommend approval.

Occupiers of controlled properties are still keenly aware of the action they are entitled to take under the provisions of the Rent Act, 1957, and under this Statute one hundred and fourteen Certificates of Disrepair were issued, whilst in three hundred and forty-four instances landlords gave undertakings to remedy the notified defects, which obviated the issue of Certificates of Disrepair. Sixty-seven Certificates of Disrepair were cancelled, and there were twenty-one cases where the tenants objected to such cancellation following notification that an application had been received. Twenty-three applications were received from tenants for Certificates to the effect that undertakings given by landlords had not been carried out, and fifteen applications from landlords for Certificates as to the remedying of defects in accordance with their undertakings, six of which could not be granted as the defects had not been remedied.

The maintenance and repair of habitable dwelling houses through the powers contained in the Public Health Act, 1936, received particular attention throughout the year. In this connexion three thousand and ninety-one repairs and improvements were effected for the abatement of nuisances associated with housing conditions.

The powers of the Housing Acts are not always the most appropriate for securing the abolition of housing defects. The more general powers of the Public Health Act, 1936, are invaluable in achieving the continuous repair work necessary to maintain the essentially sound houses in the city in a habitable condition. This contention is substantiated by the fact that the periodical housing returns to the Ministry call for records of the housing repair work accomplished under the Public Health Act, 1936.

HOUSING STATISTICS YEAR, 1958.

The following information is given in the form required by the Ministry of Housing and Local Government :—

Inspection of dwelling houses during the year :—

1.	(a)	Total number of dwelling houses inspected for housing defects (Under Public Health or Housing Acts)	2,903
	(b)	Number of inspections made for the purpose ...	7,632
2.	(a)	Number of dwelling houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925.	585
	(b)	Number of inspections made for the purpose ...	1,247
3.		Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for habitation.	480
4.		Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be reasonably fit for human habitation	536

Remedy for defects during the year without service of formal notices :—

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority ...	291
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Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or room having been made fit	Nil
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The City Engineer kindly gives the following information concerning new houses :—

(a)	Number of new houses erected during the year,	
	Total	2,104
(b)	With State assistance under the Housing Acts	
	(i) By Local Authority	905
	(ii) By other bodies or persons	Nil
(c)	Under the Housing (Financial Provisions) Act, 1933 ...	Nil

REHOUSING

Number of applicants on waiting list 1st January, 1958	...	5,152
Number of applicants on waiting list 31st December, 1958 (after revision 2,180 applications removed from list)	...	4,178
Number in Category A (First Priority)	... ..	—
Number in Category B (Second Priority)	... ..	181
Number in Category C (Third Priority)	... ..	2,902
Number in Category D (Fourth Priority)	... ..	1,095
Number of families rehoused by end of 1958	... ..	1,564
From Category A	... ..	9
From Category B	... ..	491
From Category C	... ..	748
From Category D	... ..	146
Slum Clearance	... ..	111
Others	... ..	59
Number of applications for Corporation houses made during the year 1958	... ..	2,984
Number of houses erected by the Corporation during the year 1958	... ..	905
Number of houses voluntarily closed	... ..	55
Number of houses demolished	... ..	56
Number of families rehoused as a result of representations by the Public Health Inspector's Department	... ..	71
Number of families rehoused from caravans	... ..	69

ACTION UNDER STATUTORY POWERS DURING THE YEAR

A.	Proceedings under Sections 9, 11 and 15, Housing Act, 1957 :	
1.	Number of dwelling houses in respect of which notices were served requiring repairs	Nil
2.	Number of dwelling houses which were rendered fit after service of formal notices :—	
(a)	By owners	Nil
(b)	By Local Authority in default of owners	Nil
B.	Proceedings under Public Health Acts :—	
1.	Number of dwelling houses in respect of which notices were served requiring defects to be remedied	245
2.	Number of dwelling houses in which defects were remedied after service of formal notices :—	
(a)	By owners	245
(b)	By Local Authority in default of owners	Nil
C.	Proceedings under Section 16 of the Housing Act, 1957 :—	
1.	Number of dwelling houses in respect of which Demolition Orders were made	7
2.	Number of dwelling houses demolished in pursuance of Demolition Orders...	3
D.	Proceedings under Section 18 of the Housing Act, 1957 :—	
1.	Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil

MOVABLE DWELLINGS

Evidence in detail was given by the Chief Public Health Inspector before a House of Commons Select Committee in June of the year under review. The evidence supported clauses embodied in a Coventry Corporation Bill for the purpose of ensuring a greater measure of control over movable dwellings locally. Defects in the general law, and the cumbersome time-consuming procedure which existed for dealing with the type of camping for which Coventry sought control were emphasised.

It was pointed out to the Select Committee that Coventry had had its fair share of unauthorised caravanning and "shanty town" occupation, constituting a serious obstacle to the maintenance of public health standards essential to a City. The licensing powers under Section 269 of the Public Health Act 1936 make no provision for the removal of caravans. Itinerant campers are often well aware of the forty-two consecutive days during which a site can be used before action is taken or for which a licence is necessary. The whole legislative procedure is in consequence without effective means of speedily being able to enforce reasonable conditions. These contentions were favourably received and the clauses were granted Parliamentary approval. They were therefore included in the Coventry Corporation Act 1958, which obtained the Royal assent and came into force on the 23rd July. From that date the provisions of Section 269 of the Public Health Act 1936 ceased to apply to the City, being superceded by the important new provisions of the local Act.

This Act now provides that every future licence granted by the Corporation shall continue in force for a limited period. Moreover, where the use of the land authorised by the licence involves development under the Town and Country Planning Act, then the licence cannot come into force until the necessary permission to develop is granted. A period of two months is allowed in which to consider an application for a licence. Power is given to cancel a licence, and increased penalties may be imposed for non-compliance with any condition attached. Greater restrictions are brought into effect where an application for a licence refers to the use of land as a site for six or more movable dwellings. It is obligatory upon the occupier of any land who consents to the keeping of a movable dwelling thereon to give notice forthwith to that effect to the Chief Public Health Inspector. The number of consecutive days on which unlicensed camping is allowed is fourteen, and not more than twenty-eight days in any consecutive twelve months. A movable dwelling may be removed after conviction of the person keeping the movable dwelling on any land in the City. The Corporation may, by an order confirmed by the Minister of Housing and Local Government, prohibit the use of a movable dwelling in any specified area in the City.

The above outline of the new provisions gives an indication of the powers now available for the control of unauthorised camping.

The caravan problem is a sizeable one, there being at least six hundred and fifty movable dwellings in occupation in various parts of the City. The large majority of these are subject to licensing control imposed under the provisions of the Public Health Act 1936, and periodically supervised by the Inspectorate for the maintenance of sanitary conditions. The demand for siting accommodation during the year did not place any undue demands upon that already provided. Enquiries received by the Department from prospective caravan dwellers were few. No applications were received for licences permitting new sites to be established or for the extension of existing sites. One application for a licence to station and use a caravan for a limited period under the Coventry Corporation Act 1958 was approved.

Sixty-nine families living in movable dwellings in the City were provided with Corporation housing accommodation by the end of the year.

The unauthorised use of land as a site for movable dwellings, involving nine caravans and two converted buses was reported upon to the Health Committee, and authority was given to institute magisterial proceedings against the occupier of the land. The necessary legal formalities were in preparation at the year end.

PREMISES AND OCCUPATIONS CONTROLLED BY BYELAWS AND REGULATIONS

The common lodging house in the City under the control of the Mens Social Section of the Salvation Army continued to provide much needed accommodation for single men. The improved standard of social hygiene achieved by the controlling authority through the scheme of general reconstruction, catering facilities and re-organisation was well maintained. The establishment was also well conducted and kept in a clean condition. The nightly average of men seeking lodgings during the year was 150.

An event worthy of record in a report on environmental hygiene took place during the year under review in connection with the Corporation owned mens hostel at Holbrooks. The buildings comprising this hostel were relics of the first World War. They consisted of single storey, timber framed breeze block structures, with felt covered wooden span roofs, erected primarily to accommodate female workers employed in local munition factories. After the war these hutments were taken over by the Warwickshire Coal Company of that time, and used to house single miners working in a nearby colliery. Upon being relinquished by the Company, they were acquired by the Corporation, and for the past twenty five years served as a working mens hostel. As many as three hundred single men have lived there at one time, sleeping in separate cubicles, and sharing the common rooms and communal cooking, bathing and washing facilities.

The years took a heavy toll of these temporary substandard structures and the general state of dilapidation and deterioration brought the hostel to an end. It was destroyed by fire under the control and supervision of the City Fire Brigade. A new multi-storey hostel of modern design and construction, equipped with every facility for comfortable living, recreation and leisure, capable of accommodating four hundred and five single men, is now provided. At the time of the old hostel's closure two hundred and eighty men were in occupation, most of whom took advantage of the superior residential quarters made available by the City Council in the new hostel.

Offensive Trades

- 2 Tripe Boilers
- 1 Hide and Skin Dealer
- 1 Rag and Bone Dealer
- 1 Gut scraper
- 2 Tallow Melters
- 1 Bone Boiler

The hide and skin dealer is located at the public abattoir, where tripe dressing is also carried on.

Inspections were made of the above premises regularly and a reasonable standard of cleanliness was maintained.

AIR POLLUTION.

The year 1958 has seen a gradual development and clarification of the policy and intentions of the central Government in the matter of combating air-pollution. The "prevention" aspects of the Clean Air Act 1956, including the powers for the establishment of smoke control areas and prior-approval of fuel-burning installations, have been operative for two years, but the directly prohibitory or "abatement" sections became available on 1st June, 1958. Prevention of air-pollution has always been the forte of the Coventry City Council, — an approach appropriate to a changing and developing, modern industrial City. In consequence, the impact of the "prevention" regime of the new Act was not noticed, the *modus operandi* being identical to that practised in Coventry for ten years by virtue of the Coventry Corporation Act, 1948. Since that time, and particularly during the year under review, the technical and administrative "know-how" derived from experience gained and information accumulated in the Department, has been of considerable assistance to the many enquirers from other local authorities. The Chief Public Health Inspector addressed several professional societies and associations on the subject, including the Incorporated Plant Engineers, the Association of Public Health Inspectors, and the Warwickshire Clean Air Council. A member of the staff was invited to be a lecturer on "Prior-Approval of Fuel Burning Installations" at the week-end school of the East Midland Centre of the Association of Public Health Inspectors at Alfreton, Derbyshire.

Clean Air Act, 1956

...“The sections of the Act which became operative during the year under review included those relating to dark smoke emission, grit and dust from furnaces, railway engines, vessels, and Crown premises (in part). The Regulations prescribing the permitted limits for emissions of dark smoke operated from 1st June, 1958, and were extremely important and significant in that they set the standard for the Government’s plan of action. The national policy for clean air has not, over the years, been clear-cut. Previous legislation lacked positive conviction, and local authorities and officers were frustrated by its feebleness and the numerous convenient defences available to offenders. The Clean Air Act contains defences, making its successful application still not easy in an administrative sense, but a healthy sign is the evidence of the man-in-the street’s growing interest in the subject. The Act is making an impact. On the industrial side all public health inspectors have already been made pointedly aware that industry expects their guidance to avoid any contraventions of the Act. This approach will have the effect of causing local authorities to recruit more specialist staff, and generally to stiffen its attitude since, after all, the local authority is the general public, and the convictions of the one are reflected in the actions of the other. Coventry has long held an unusual position in this context due to the foresightedness of its citizens and representatives. Possessing the first smokeless zone ever and advanced powers for the prevention of air-pollution since 1948 by private and then unique Act of Parliament, its justifiable pride in this pioneering achievement is enhanced by the knowledge that the national Act now contains identical provisions.”...

...“A broad range of industrial air-pollution problems can be dealt with by means of the new Act. Already in Coventry a gratifying response has been received from industry in the matter of preventing smoke and grit, and important discussions with managements are the order of the day. The doctrine of “persuade rather than prosecute” is still adhered to, except in the most flagrant cases. It is believed that sensible, forceful, and consistent administration by the Local Authority coupled with the co-operation of the man in the street and in the boilerhouse, the Act can achieve the desired purposes of reducing smoke, grit and dust. During the year under review the first prosecution in Coventry under the Act occurred. A large engineering firm was observed to emit smoke as dark as or darker than Ringelmann No. 2 shade. Investigation indicated that the firm was burning-off oily material from the insides of drums. Proceedings were instituted, which resulted in the City Magistrates’ Court imposing a fine of £5.”...

...“Ringelmann Shade charts have been used by public health inspectors for the assessment of smoke densities for a number of years, but without official recognition of their standards in legislation. Unfortunately, their use is a conspicuous two-man business, and the Department has long advocated the development of optical methods

of measurement. An instrument is now available and has been in regular use by Coventry public health inspectors since the operative date of the Clean Air Act, 1956. It is a proprietary instrument known as the "Telesmoke" and smoke emissions are viewed through the focused telescope and compared with built-in discs of opacity equal to Ringelmann shades 2 and 3." . . .

Dust, Grit and Fume Emissions.

This problem has assumed greater proportions in the past few years with consequent difficulties for Public Health Inspectors in the matter of measurement of deposited matter, location and proving of sources. Measurement techniques and equipment at present in use suffer from the defect of being non-directional and, combined with the uncertain effects of wind-direction and other climatic conditions, render any positive use far from satisfactory. The Department of Scientific and Industrial Research and the British Standards Institution are investigating this aspect, and it is hoped that reliable methods can be developed.

The provision of suitable grit-arresters to all *new* solid fuel-burning installations, with discretion concerning capacity and type of fuel, is being strongly pressed as a requirement under the prior-approval scheme. In the cases of existing suspect installations, observations and measurements are being continued with subsequent informal approaches, where appropriate, to firms' managements. During the year under review several factories have reduced or eliminated particulate matter emissions by the installation of grit-arresters, adaptation of combustion techniques, or change of fuel. Particular success has been achieved in regard to foundry cupolas in three instances, with significant quantities of grit arrested daily which formerly were vented to the atmosphere. At one foundry, the subject of long complaint, wet-type arresters were fitted to five cupolas at a cost in excess of £4,000.

Prior Approval of Fuel Burning Installations

Prior approval of plant, as administered by local authorities under Section 3 of the Clean Air Act, 1956, requires the submission of plans and specifications of proposed furnaces for consideration of their likely smokeless qualities. It also requires that before installation commences approval is signified by means of a certificate issued by the authority. This form of smoke prevention control is of a voluntary-participation nature, but notification of the local authority of intention to install new plant is compulsory. Prior approval of plant is not new to Coventry, — it was a feature of the private Act. Coventry Corporation Act, 1948, and has been operated successfully since that time. Closely linked with prior-approval of plant is the procedure laid down by the Clean Air Act, 1956, for the control of chimney heights whereby a local authority is empowered to reject plans of new chimneys unless the height is such to prevent smoke, grit dust or gases from becoming prejudicial to health or a nuisance.

Control of chimney heights is a new and extremely useful feature of legislated smoke prevention, and similar data for chimney height estimation, concerning plant type and capacity, and fuel, etc., is required for the prior-approval scheme for plant. The two procedures largely overlap and, as all new building plans are submitted to the City Engineer and Surveyor for building byelaw approval, it has necessitated a very close liaison between the two Departments in this context. During the year under review there were 27 notifications of intention to install new fuel-burning plant, and 16 applications for prior-approval.

Control of Chimney Heights.

...“Section 10 of the Clean Air Act, 1956, gives power to local authorities to reject plans of new chimneys unless the height is sufficient to prevent, so far as practicable, the smoke, grit, dust or gases from becoming prejudicial to health or a nuisance. There are certain other factors to be taken into consideration and provision is made for appeal to the Minister if plans are rejected under this Section. Undoubtedly, the control was given to prevent any additional source of low-level emission of gases.”...

...“Only by a suitable chimney height can this adequate dispersion of sulphur dioxide be achieved, which indicates forcefully the necessity for plant, type of fuel, and chimney height, to be “tailor-made” not only for the job in hand, but also for environmental hygiene.”...

Unfortunately, the central Government has not seen fit to issue guidance on the maximum allowable concentration (MAC) of sulphur dioxide at ground level, and it is left to individual local authorities to adopt their own limits. It is hoped that the rights of appeal available to applicants following rejection of plans of chimneys will persuade the Government to issue a directive. Valuable work on this subject has already been done, with probably Coventry in the forefront, but obviously further research is necessary. Since the operative date of the Act three plans have been rejected, or consideration adjourned pending discussions between applicant and the Department. In two instances concerning oil-fired boilers, following negotiations with the firms and oil companies, the chimney heights were raised from 25 ft. to 35 ft. and 25 ft. to 30 ft. respectively. In the third case concerning the addition of one, possibly two or three in the future, large coal-burning mechanically-fired Economic boilers to an existing installation of two similar boilers, the plans were rejected at the instigation of this Department. Discussions with the technical officers of the applicant company and the Federation of British Industries finally reached agreement to erect one chimney stack of suitable height and dimensions in place of the three sub-standard stacks originally proposed, thereby reducing the likely concentration of sulphur dioxide at ground level to proportions acceptable by the Department.

The MAC of sulphur dioxide is not, according to the scheme devised in Coventry, applied to the whole area. The City area has

been divided into sections of three different types viz. "black," "grey" and "white" areas. The "black" areas are in the industrial parts of the City, and the "white" areas on the semi-rural outskirts. The classification of areas of the City is decided upon arbitrarily, and based upon results from continuous measurement of sulphur dioxide levels at twelve stations (Chart A). A MAC. of sulphur dioxide at ground level likely to result from a new source of combustion, as calculated from plant and fuel details, has been prescribed for each of the "black," "grey" and "white" areas. The classifications will be re-assessed at yearly intervals since it is not expected that the pattern of results will forever remain static, particularly in areas where industrial development is proceeding.

SMOKE CONTROL AREAS :—

... "Work is still proceeding towards the establishment of two large smoke control areas in Coventry as part of the Government's plan, through the Clean Air Act, 1956, to combat air-pollution. The two areas have been pilot-surveyed, and already there has been a voluntary change-over to coke burning and smokelessness in some degree. The usefulness of such trends is obvious and should lessen the extent of upheaval when the Orders are confirmed and the projects materialise. The black areas of the country, mentioned in the Government Committee on Air Pollution Report (Beaver Report), were not at the time of publication accurately defined. It is known, however, that the Minister insists upon smoke control areas being promptly established in black areas as a matter of urgency. Recent classification by the Minister on what constitutes a black area elicited the information that Coventry is indeed is indeed classified as a black area !"...

Air Pollution Measurement

Continuous measurement of deposited matter apart from sulphur dioxide in the atmosphere is carried on, involving monthly analyses, at twelve stations in the City area, sited as follows :—

- Station 1. The Precinct.
- Station 2. Day Nursery, Edgwick
- Station 3. Spon End Water Undertaking
- Station 4. Pumping Station, Whitley.
- Station 5. G.E.C. Allotments, Copsewood.
- Station 6. Stoke Park Secondary School.
- Station 7. Parkgate Junior School, Holbrooks.
- Station 8. Wood End Primary School.
- Station 9. Foleshill Cemetery.
- Station 10. Cheveral Avenue, Radford.
- Station 11. Mount Nod Pumping Station.
- Station 12. Memorial Park (including meteorological station).

In addition, daily measurement is made of the actual quantity of smoke and sulphur dioxide in the air by means of daily smoke filters and volumetric sulphur dioxide apparatus at :—

Station V1 Public Health Inspector's Department, Council Offices, Earl Street.

Station V2. Lyng Hall School, Blackberry Lane.

Station V3. Coventry Technical College, The Butts.

In order to combat air-pollution, to plan for the development of industry, and to control the heights of proposed chimneys, reliable knowledge of the nature and extent of the different kinds of air-borne pollutants must be known. Only by continuous measurement using scientifically standardized methods is such information available. Moreover, the analytical results therefrom can only begin to prove their reliable usefulness after a period of, say 3 — 5 years, when a pattern of seasonal variations, correlated to prevailing climatic conditions, becomes apparent. On this basis the extent of measurement coverage in Coventry is wide, but not yet as complete as desired, and four additional measuring stations are proposed for 1959. The accompanying charts indicate the variations from district to district of air-borne deposited matter, and sulphur dioxide as measured at the twelve stations during 1958 (Charts A and B).

The concept of the relationship between planning of industry and air-pollution has not until recently been appreciated. Proposals for the establishment of industry are usually considered by the planning authority from the point of view of whether or not they fit in with accepted schemes of zoning for a particular area, whether there would be interference with existing amenities, and a host of other factors ranging from possible noise nuisance to road safety. All these are important, but it is now recognised that the problems likely to arise from air-pollution should come into the picture at an early stage of planning. If local authorities are to control the amounts of particulate matter and gases in the atmosphere by the control of chimney heights, as intended by the Clean Air Act, 1956, accurate knowledge of the existing "background" quantities of these pollutants must be known. Indiscriminate acquiescence to new sources of pollution in already heavily aeri-ally polluted districts is asking for trouble. Unfortunately, the central Government is loath to fix maximum permissible limits for community air-pollution. There is a definite case for Government guidance for councils facing up to the problems of redevelopment and planning, and the allied responsibilities imposed by the Clean Air Act, 1956.

Warwickshire Clean Air Council.

The Chief Public Health Inspector Reports upon the Activities of this body as follows :—

... "After a year's operation the Warwickshire Clean Air Council is now firmly established and, apart from a unique organization of county-wide measurement of air-pollution, is making its presence

felt in all aspects of the subject. The Council is a voluntary association of 20 local authorities in the county, established as an advisory and technical body with the object of abating the pollution of the air and assisting member-authorities to implement the Clean Air Act, 1956. Measurement is a primary function and approximately 150 air-pollution metering units are spread throughout Warwickshire (Fig. 1), giving the intensity and extent of pollution over a wide area. Technical advice, publicity material, and panels of lecturers are available, and already it has shown itself to be an influential force, particularly in the formulation of uniform standards and common approach in a specialized branch of environmental hygiene.

Coventry has taken a leading role in the establishment and operation of the county Clean Air Council, being the largest industrial member authority. Under the able and skilful chairmanship of Coventry City Councillor R. Loosley (Chairman Coventry Health Committee), plans and policies have been decided upon for concerted effort, within the framework of the new legislation, to produce cleaner air. Chemical analysis of all air-pollution samples in the county, apart from the daily estimations, is carried out in Coventry by the City Analyst. Information and library facilities concerning all aspects of the subject, are available to representatives of member authorities at the Coventry Public Health Inspector's Department. Refresher courses, with visits of inspection to factory boiler plants, have been conducted at Coventry with tutorial services by the Chief Public Health Inspector and two divisional inspectors with specialist knowledge. For unqualified public health inspectors a course of 32 weekly lectures is established in conjunction with the Coventry Technical College using the same tutors, the latter course being preparation for the Smoke Inspector's Certificate of the Royal Society of Health in connection with which Coventry is an approved centre.

Continuous measurement and recording of air-pollution is but one of the public health inspector's aids in preventing and reducing it, yet its fundamental importance should be realised. The data so collated could be the cornerstone of future advances, both technologically and legislatively. Moreover, a feature of its county-wide organisation lies in its collaboration with county and city schools. Daily measurement of air-pollution is carried on by senior pupils under the supervision of teaching staff, thereby providing a means of direct application of general science and useful publicity directed at the receptive minds of the younger generation.

The trend towards county or regional organisations such as the Warwickshire Clean Air Council is very encouraging. Air-pollution knows no boundaries, at least in the municipal sense, and smaller local authorities may not possess the facilities for measurement nor administration of duties imposed by the Clean Air Act, 1956. A county organisation, providing a pooling of equipment, and technical and administrative "know-how," can become highly influential and at the same time institute research aimed at improving methods and apparatus. Provision of a large number of units of measuring



Figure 1. — Warwickshire Clean Air Council Air Pollution Measurement Stations.

apparatus for the Warwickshire Clean Air Council prompted study in the Public Health Inspector's Department of the possibilities of improvements. Normally the equipment is obtained from specialist suppliers who work to a standard pattern, which has not changed over the years. An improved design of deposit gauge was decided upon in consultation with the Analyst and the Technical Committee, and a prototype produced by a local engineering firm (Fig. 2) to conform with the British Standards specification for material and dimensions. The improved design was accepted and mass-produced for use by the Warwickshire Clean Air Council at a cost of approximately 60% of the standard instrument of traditional design.

An interesting extension of the functions of the county organisation is to be seen in its recent decision to use, as far as practicable, the existing air-pollution stations spread throughout the county for the purpose of measuring radio-activity in the atmosphere."



Figure 2 — Improved Design Deposit Gauge for Measurement of Air-Borne Deposited Matter.

CANAL BOATS

During the year thirty-two visits were made to the canal, and the cabins of thirty boats were examined and found to be occupied by twenty men, seventeen women and twenty-four children.

There was no case of infectious disease notified during the year. All the boats inspected were found to be free from vermin infestation.

Other details for the year are as follows :—

Total number of boats registered up to 31st December, 1957	...	...	...	...	...	...	551
Boats added to register in 1958	...	...	...	...	...	...	Nil
Registrations cancelled	...	...	...	...	...	...	328
Actual number of boats on register at 31st December, 1958	...	...	...	...	...	...	223

RIVERS AND STREAMS

Throughout the year a continuous check by observation and sampling was maintained on the numerous ditches, streams, brooks and rivers in the City. 145 samples of water were submitted to the City Analyst, most of the samples were taken from fixed sampling points, and thus we were able to obtain a definite picture of river conditions at all times. From the sample results, it is worthy of note that conditions have not deteriorated in the rivers and streams, and in some instances, improvement has taken place.

The main rivers are still carrying a degree of pollution due to trade waste discharges, and to the fact that some sewers surcharge and overflow into the storm water system much earlier than at six times dry weather flow. This is due in some cases to the fact that the sewers are overloaded, and in other instances, due to the sewers not being self cleansing, with the resultant silting up of the bed of the sewer. One instance of this was the cause of the continual pollution of the brook at the Sphinx Sports Ground, in this case about seven tons of silt were removed from approximately 100 yards of sewer near a surcharging point. Since this portion of sewer was cleansed, improvement has been noticed in the brook.

Pollution was found in the Hall Brook, and the source was traced to a colliery outside the City. A meeting was arranged with a Coal Board representative and an Officer of the Severn River Board. After discussion and inspection of the brook and source of pollution, it was decided that extra traps should be provided on the storm water outlet. Plans were drawn up, and an undertaking given that the work would be completed by Easter 1959.

During the summer, a complaint was received that a number of fish had been found dead at Wyken Slough, and analysis revealed the presence of cyanide. Investigations were carried out, and it was found that trade waste from a plating shop, situated outside the City, discharged into a brook, which feeds the Slough. This information

was passed to the Inspector of the district, who took the matter up with the factory Management, and no further trace of cyanide has been discovered in the brook up to the present time.

At a large factory, situated near the City boundary, nuisance in the past has been caused by the discharge of oil, grease, and "suds" into the Eastern Green Brook. Representations were made to the Company, and they agreed to install a large modern grease, oil and sludge trap at an approximate cost of £2,000. This has now been put into operation and has been responsible for a great improvement in the brook concerned.

"Suds" were discovered on a number of occasions in a roadside ditch at Clifford Bridge Road. It was thought that the "suds" came from one of the factories situated nearby. All of the factories were visited and given instructions to discontinue the disposal of "suds" by means of the storm water drains. The offending factory was not discovered, but after the above visits, nuisances from the "suds" in this ditch ceased.

MEAT INSPECTION

The high level of the slaughtering carried out at the public abattoir continues. Beef killing remained constant at a little over the 21,000 mark, whereas sheep killing fell by some 5,000, which was offset to some extent by an increase in the number of pigs slaughtered of some 3,000.

The bulk of the slaughtering continues to be carried out by the main wholesalers who operate at the Meat Market, the Fatstock Marketing Corporation, and G. H. Monk and Co. Ltd. Besides these two main agents, the Co-operative Society, M.S.K. Slaughtering Contractors, and two smaller contracting groups form the entire slaughtering agencies who operate at the abattoir. Many private butchers have ceased the practice of slaughtering their own animals, and are content to buy the animals at the various cattle markets and send them to the public abattoir to be slaughtered by the contracting slaughtermen. On the other hand, many are buying "off the hook carcasses" at the wholesale meat market. I have reported on this trend in previous years, and it now seems that the days of the butcher-slaughterman are over so far as the butchers in the city are concerned. In one way, this trend is to be regretted, and it means the virtual end of the butcher craftsman. It may well be that this trend is the natural outcome of the system which came into being during the war years of control and meat rationing, when allocation from a central meat depot was the sole source of the butcher's meat supply.

It is interesting to record that for the years after decontrol, the number of animals killed at the abattoir have, in each year, been about twice as many as were killed in the first year after the opening of the public abattoir in 1932. This increase in slaughtering has, of course, been brought about in many ways, the chief of which has been

the concentration of slaughter as done by slaughtering groups, compared with the more individual methods in vogue before the years of control. In this respect speed has taken the place of the method of the butcher owner, and consequently pride of finish has been sacrificed for increased throughput. Increase in the city's population and increased consumption per head of the population has resulted in the abattoir being fully extended to cope with present day killings. On the whole the building has been able to cope with the post-war increase, but certain improvements will, of necessity, have to be made in the very near future, if the abattoir is to conform to recent statutory requirements.

During the year, additional lairages accommodation were completed and were being used before the Christmas peak-killing period was under way. The new buildings stand on the site of the old cattle market adjoining the abattoir. The full benefit of these new lairages will be widely appreciated by all meat traders during the flush periods of lamb, beef and pig killings in future years. Apart from this, first-class lairage accommodation is essential if one is to produce carcase meat in its best condition.

Working hours have continued to be from 6.0 a.m. to 6.0 p.m. on Mondays to Fridays, and from 6.0 a.m. to 12 noon on Saturdays. When the occasion demands, such as happens during the heavier Christmas killings, limited extensions to these hours are allowed. Grants towards the meat inspection costs incurred in excess of the city's requirements are made by the Ministry of Agriculture, Fisheries and Food. The local need is calculated at approximately 400,000 units. Actual throughput is roughly 600,000 units.

During the year, much has been written in the national press regarding the lack of inspection of the meat produced at various centres. I am happy to report that a hundred per cent. inspection is carried out at the public abattoir throughout the year. In order to do this, the meat inspectors work on a shift system, so that an inspector is always present when slaughtering is in progress. To be completely effective it is essential that a hundred per cent. meat inspection must be carried out when slaughtering is in progress. Moreover, our inspection arrangements cover the whole of the phases of meat control routine from ante-mortem examination to the final inspection of the dressed carcase.

Animal Health

The improvement in the quality of the animals slaughtered at the abattoir, and noted in previous years, continues. However, as reported last year, the increase in the number of cases of cysticercosis discovered gives rise to some anxiety. This year saw an increase of 159 cases of this condition, and proves that the condition is becoming more established than was previously believed to be the case, and stresses the importance of control measures, other than its detection in the dead animal, being investigated to the full, and a great im-

provement being made nationally in the means and methods of sewage disposal.

As was the case last year, the parasitic condition — fascioliasis — was the most common condition found in bovine animals, and nearly 37,000 lbs. of beef liver was lost to the local meat trade from this condition alone. The extremely wet weather encountered during the year no doubt had its influence in promoting the development of the parasite, but with such heavy losses occurring year after year, there should be ample evidence available for the necessity of research to minimise its occurrence and rid cattle and sheep of the parasite in all its stages. About one beast in every fifteen was so affected that the whole liver was condemned and approximately one beast in every five slaughtered had a part of its liver affected by the parasite.

There was a slight decrease in the occurrence of abscess conditions in cattle, but actinomycosis was just as frequently seen as in the previous year.

In sheep, as in cattle, parasitic conditions were the cause of the major condemnations, the main agent again being the liver fluke.

In pigs, respiratory diseases such as pneumonia and pleurisy were again much in evidence, there being an increase of over 1,000 cases of pneumonia. There was a similar increase in the number of cases of cirrhosis in the pigs' livers. About one in every twelve pigs was found to be affected with pneumonia or pleurisy. The spread of this condition is no doubt to be found in the present "intensive" trends in pig husbandry.

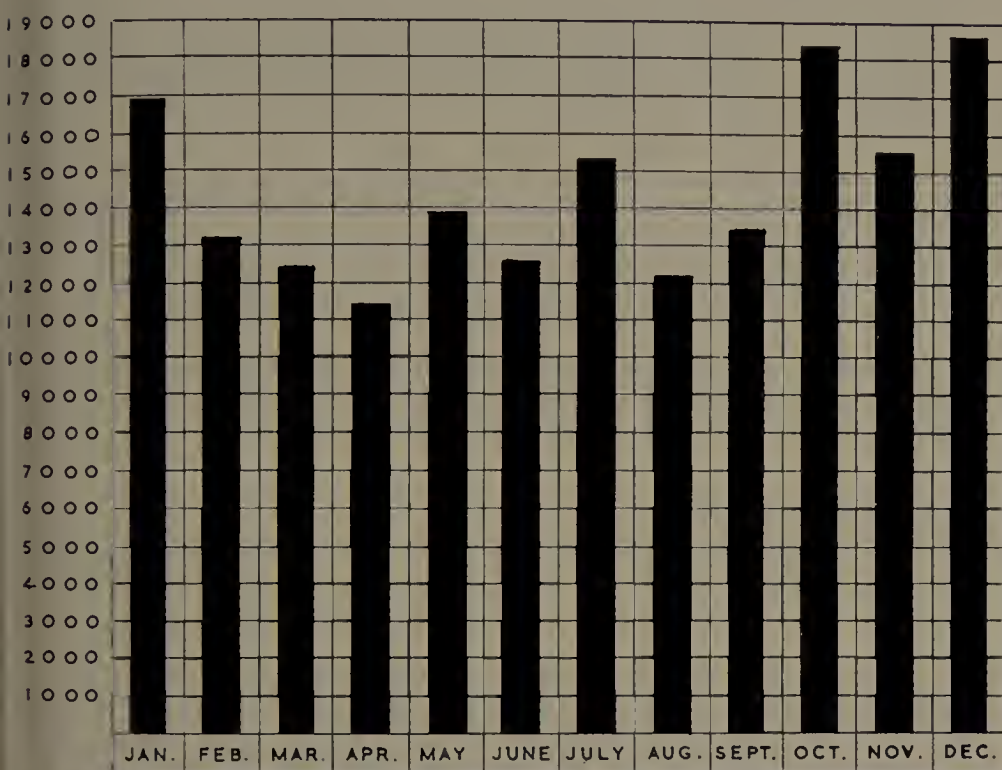
Eradication of Tuberculosis.

The incidence of this dreaded disease in farm animals continues to decline year by year, and for the first time in our records at the public abattoir no case of congenital tuberculosis was discovered. This improvement has been brought about gradually, and three years from now may well see the end of what was one of Britain's major cattle diseases.

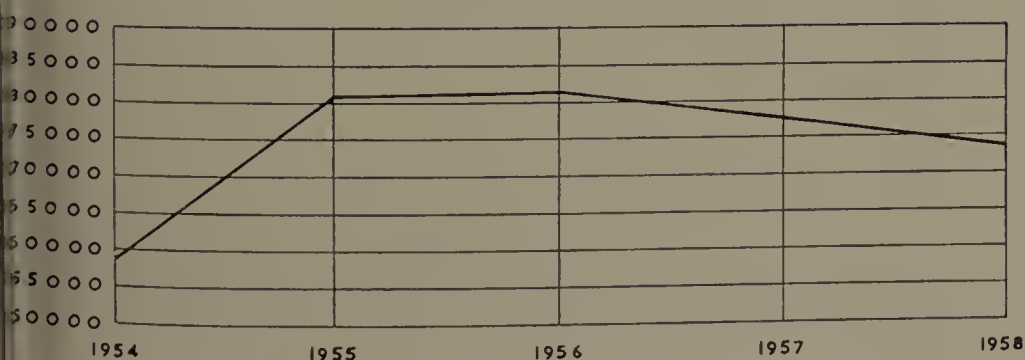
Tuberculosis in cattle is potentially a great danger to public health, but there is also the insidious nature of the disease, which reduces the general health and seriously affects the economy that must also be borne in mind.

The area eradication plan for eliminating the disease was inaugurated in 1950 when the whole country was divided into areas which would, in their turn, pass through three stages towards complete freedom from the disease. The scheme was progressive, and initiated in new areas so that eventually the whole country would be covered. The first stage, which usually lasted two years, consisted of free testing of cattle within the area. When a herd was cleared of the disease precautions were taken to ensure it was not re-introduced. The next step was to designate the area an "eradication area," and all herds in these areas were required to be compulsorily tested if they were not in the voluntary scheme, and all infected cattle

CHART ILLUSTRATING ANNUAL KILLING
SPREAD-OVER FOR 1958.



GRAPH SHOWING THE NUMBER OF
ANIMALS SLAUGHTERED AT THE
PUBLIC ABATTOIR DURING THE
LAST FIVE YEARS.



slaughtered with payment of compensation. Once all cattle were free from infection the area was declared "attested."

Voluntary testing of cattle in South Warwickshire has been carried out during the past three years, and on March 1st, 1959, all herds which have not become attested will be subject to compulsory testing. This will then bring to an end the voluntary scheme, and it is hoped that complete eradication of the disease will be achieved by October 1st, 1959.

All the reactors and also the animals slaughtered under the Tuberculosis Orders are brought in to the public abattoir for slaughter and inspection, and the work of the meat inspectors in this connection has very frequently been the subject of commendation by the officers of the Ministry operating the eradication scheme.

Findings by the meat inspectors are readily given to the veterinary officers of the Ministry, and a friendly and cordial liaison exists between them and the officers of the Corporation.

Diseases of Animals Act.

Two cases of Swine Fever were confirmed in pigs slaughtered at the abattoir during the year. In each case the required disinfection measures were carried out, and carcasses and offal incinerated.

Post mortem examinations were carried out in all cases where animals had died in the lairages or in transit ; in all instances where notifiable disease was suspected blood smears were taken for pathological examination. No case of notifiable disease was discovered.

Imported Meat

There was a drop of about ten per cent. in the amount of imported meat "pitched" at the wholesale market, where, with only one exception, all the city's imported meat is handled.

Routine inspections of the wholesalers' stalls are made daily by the meat inspectors, and during the year 1,253 lbs. of imported carcase meat and offals were found to be unfit for food. As was the case last year, storage deterioration rather than any specific disease was the main reason for condemnation.

The conduct of the persons engaged in its handling and transport has generally been up to the standard of the statutory requirements.

Meat Transport and Handling

The meat inspectors maintain a daily check on the vehicles being used to carry away meat and offals from the meat market, and the cooling hall. Most of the meat is carried by meat transport contractors, although there has been an increase, during the year, in the number of the vans used by private butchers. On the whole,

those engaged have generally complied with the provisions of the Food Hygiene Regulations relating to meat transport. In a few cases it has been necessary to make representations to make good some omissions, and they have been speedily remedied.

In one case, magisterial proceedings were taken against a butcher for having dirty duckboards in his vehicle and for not taking steps to prevent meat becoming contaminated. The case was found proved, and a fine of £5 imposed.

The Slaughterhouses' Act, 1958

The above Act came into force during August, the basic provision being to establish certain minimum standards in the construction and operation of slaughterhouses.

Regulations made under this Act lay down the standards to be required for maintaining the best hygienic conditions in all the processes associated with the slaughter of animals.

Much requires to be done if we are to bring our abattoir up to these standards, and it is hoped a start will be made on implementing the regulations when they come into force in early 1959.

Slaughter of Animals' Acts

More than fifty licensed slaughtermen are engaged with the various firms using the abattoir for their slaughtering. The licences are subject to annual renewal, and in no case has there been any misdemeanour with regard to the humane treatment and slaughtering of animals.

Cruelty to Animals

The senior meat inspector was required to give expert evidence in a case of alleged bestiality heard at the Rugby Magistrates' Court during the year. The case was sent to the Birmingham Assizes where a plea of guilty was entered. The evidence given by the senior meat inspector was of post mortem findings in a beast slaughtered at the public abattoir some two months before the actions of the individual concerned became a matter for police investigation.

General

The appointment of Mr. L. Himsworth and Mr. J. N. Marshall at the start of the year meant that it was possible to amend the rota system of abattoir duties among the district meat inspectors. The old system is still worked during holiday periods and on Saturday mornings, etc.

The relations between the meat inspectors and the veterinary surgeons in the district remain most cordial and friendly, with close liaison and common interests being fully maintained.

All possible linkages between post mortem discoveries and field work is at all times being fully realised, and much valuable information is passed on from time to time.

The student public health inspectors were given full facilities to gain practical experience in meat inspection during the year.

The meat inspectors supervise the collection of pharmaceutical products, as well as the ancillary trades carried on at the abattoir, such as hide and skin collection, bye-products, and tripery.

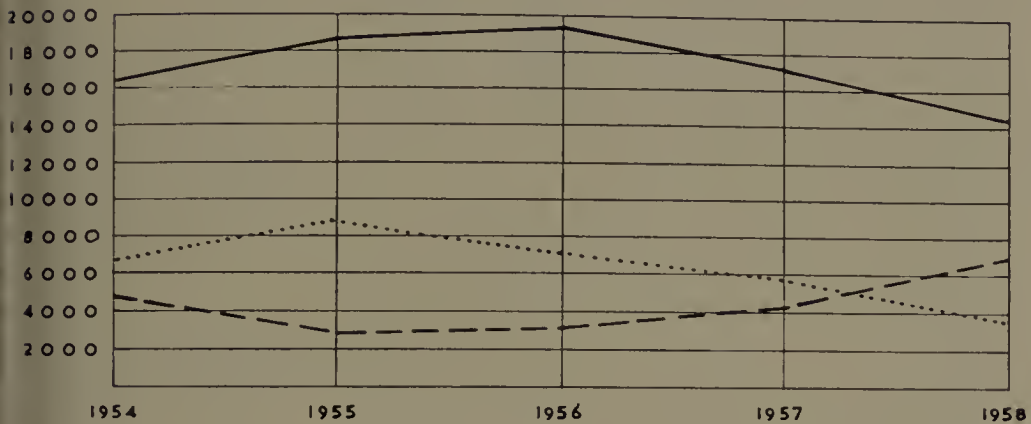
During the year delegates from abroad and parties from local organisations have been shown around the abattoir, and the work of the meat inspectors explained and demonstrated.

Biological specimens have, throughout the year, been made available for many of our secondary schools and technical colleges, and has been much appreciated by the teaching staff of these establishments.

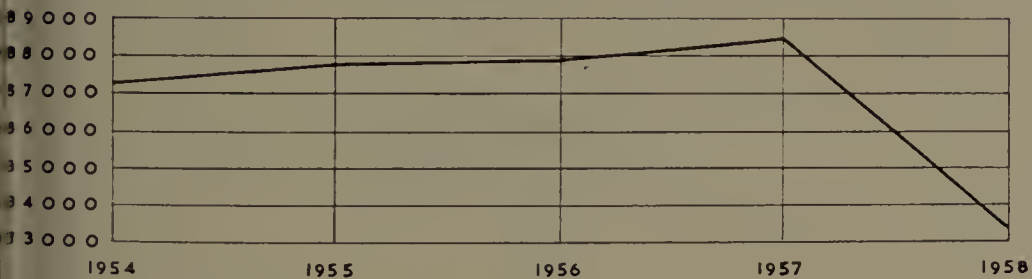
GRAPHICAL REPRESENTATION OF ANNUAL KILL AT THE PUBLIC ABATTOIR.

BOVINES.

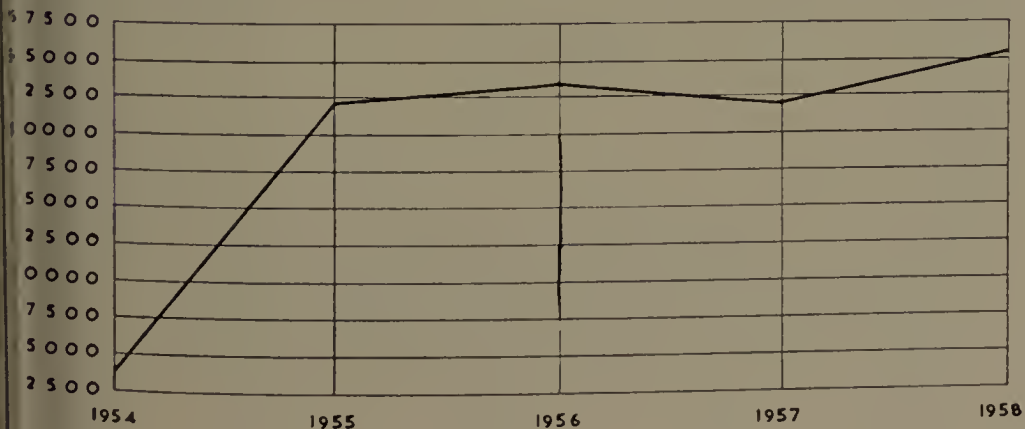
————— CATTLE (OTHER THAN COWS).
 - - - - - COWS.
 CALVES.



SHEEP.

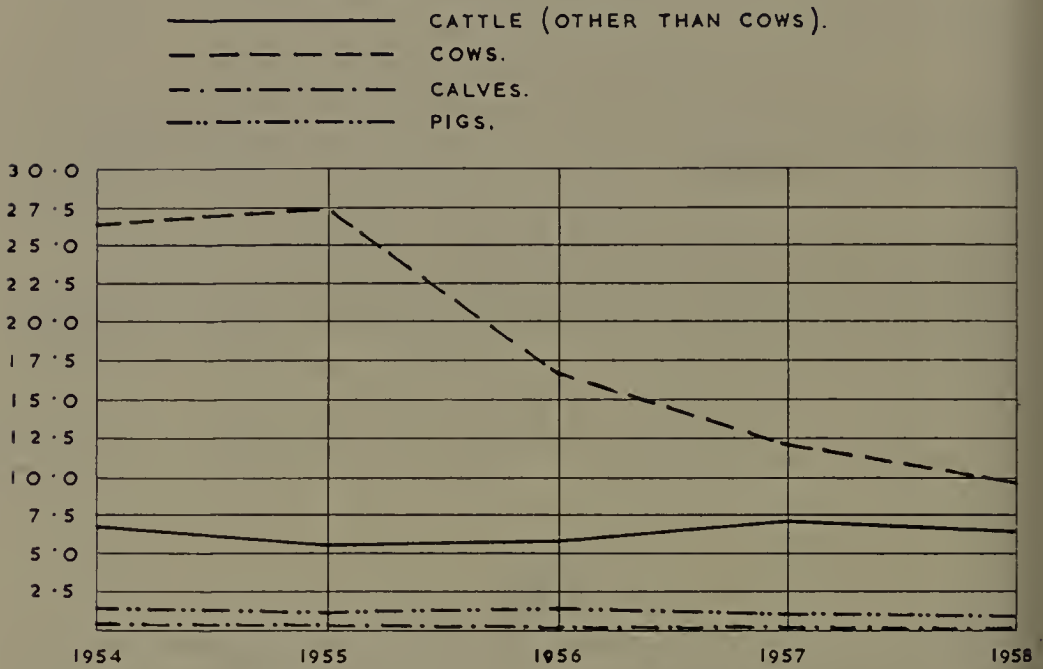


PIGS.

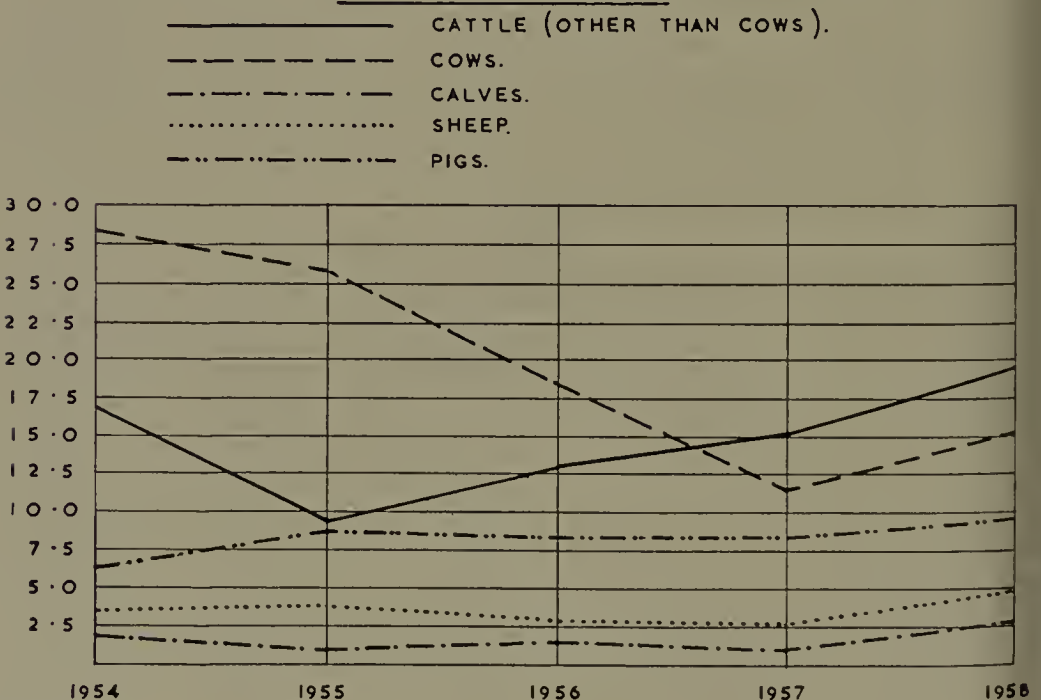


GRAPHICAL REPRESENTATION OF PERCENTAGE OF DISEASE INCIDENCE IN ANIMALS SLAUGHTERED.

(A) TUBERCULOSIS.



(B) DISEASES OTHER THAN TUBERCULOSIS AND CYSTICERCOSIS.



SUMMARY OF INSPECTIONS OF SLAUGHTERED ANIMALS COVENTRY PUBLIC ABATTOIR, 1958.

Carcases and Offal Inspected and Condemned in Whole or in Part

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
No. killed (if known) ...	14,391	6,746	3,435	83,328	65,415	—
No. inspected ...	14,391	6,746	3,435	83,328	65,415	—
<i>All diseases except Tuberculosis and Cysticerci</i>						
Whole carcases condemned ...	4	11	34	68	84	—
Carcases of which some part or organ was condemned ...	2,807	1,004	54	4,053	6,072	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	19.53	15.05	2.56	4.95	9.41	—
<i>Tuberculosis only</i>						
Whole carcases condemned ...	12	29	1	—	2	—
Carcases of which some part or organ was condemned ...	928	629	—	—	697	—
Percentage of the number inspected affected with tuberculosis ...	6.53	9.75	—	—	1.07	—
<i>Cysticercosis</i>						
Carcases of which some part or organ was condemned ...	213	12	—	—	—	—
Carcases submitted to treatment by refrigeration	26	—	—	—	—	—
Generalised and totally condemned ...	—	—	—	—	—	—

The figure for Sheep and Lambs includes Goats (less than 50).

Diseases (Other than Tuberculosis) Affecting Whole Carcases

Disease — Condition				Cattle other than Cows	Cows	Calves	Sheep	Pigs	Total
Emaciation	...	...	...	—	7	—	27	—	34
Immaturity	...	...	...	—	—	12	—	1	13
Moribund	...	...	...	—	—	5	9	11	25
Fever	...	...	...	—	1	6	—	30	37
Oedema	...	...	...	—	—	2	11	4	17
Septicaemia :—									
(a) Septic Pneumonia	...	...	...	—	—	2	—	4	6
(b) Septic Pleurisy	...	...	...	1	2	—	—	2	5
(c) Septic Peritonitis	...	...	...	—	—	—	—	4	4
(d) Septic Mastitis	...	...	...	—	—	—	2	—	2
(e) Septic Metritis	...	...	...	—	—	—	1	—	1
(f) Septic Arthritis	...	...	...	—	—	—	—	3	3
Pyæmia	...	...	...	—	—	2	8	3	13
Toxaemia	...	...	...	1	—	—	5	—	6
Jaundice	...	...	...	—	1	1	—	3	5
Joint-ill	...	...	...	—	—	2	—	—	2
Swine Erysipelas	...	...	...	—	—	—	—	11	11
Swine Fever	...	...	...	—	—	—	—	2	2
Uraemia	...	...	...	—	—	1	—	—	1
Malignant Neoplasms	...	...	...	—	—	—	1	2	3
Extensive Injuries	...	...	...	—	—	—	2	—	2
Leukaemia	...	...	...	—	—	1	1	—	2
Osteomalacia	...	...	...	—	—	—	—	1	1
Blackquarter	...	...	...	1	—	—	—	—	1
Sarcosporidia	...	...	...	—	—	—	—	1	1
Anaemia	...	...	...	—	—	—	1	—	1
Gangrenous Pneumonia	...	...	...	—	—	—	—	1	1
Paratyphoid	...	...	...	—	—	—	—	1	1
Fibrosis	...	...	...	1	—	—	—	—	1
Total				4	11	34	68	84	201

**Diseases and Conditions (Other than Tuberculosis) Affecting Parts or
Organs Encountered During Inspections of all Animals During the
Year**

Disease — Condition	Cattle other than Cows	Cows	Calves	Sheep	Pigs	Total
Oedema	10	6	—	—	—	16
Fatty infiltration	—	2	—	77	11	90
Pigmentation	12	3	3	2	—	20
Emphysema	2	6	—	—	—	8
Pleurisy	99	31	2	33	532	697
Pneumonia	30	8	19	106	3703	3866
Pericarditis	64	10	4	29	975	1083
Cirrhosis-hepatitis	—	—	2	—	1846	1848
Enteritis	20	29	—	5	49	103
Mastitis	—	14	—	—	—	14
Arthritis	—	—	—	—	16	16
Nephritis	10	29	—	—	55	98
Peritonitis	249	98	3	16	430	796
Abscess	746	150	6	72	39	1013
Haemorrhage	6	4	—	2	2	14
Tumours	8	3	—	5	2	18
Angiomata	11	325	—	—	—	336
Johne's Disease	25	61	—	3	—	89
Actinomycosis-bacillosis	207	32	—	—	3	242
Fascioliasis	1177	315	—	1078	—	2570
Strongylosis	—	—	—	61	—	61
Echinococcus	62	79	—	133	36	310
Pentastomes, etc.	241	61	—	2084	—	2391
Fractures, injuries, etc.	29	5	2	7	—	43
Rash	—	—	—	—	8	8
Bacterial necrosis	13	3	—	—	—	16
Fibrosis	4	2	—	—	—	6
Fat necrosis	3	2	—	—	—	5
Bone-taint	2	—	—	—	—	2
Adenitis	2	1	—	—	—	3

Eradication of Bovine Tuberculosis

	Advanced	Non Advanced	Total
Animals slaughtered under the provisions of the Tuberculosis Order, 1938-46.	5	0	5
Animals slaughtered under the provisions of the Tuberculosis (Slaughter of Reactors) Order, 1950.	3	55	58

Tuberculosis in Calves

No case of congenital tuberculosis was discovered in any of the calves slaughtered at the public abattoir, but one case of post natal generalised tuberculosis was found.

Pharmaceuticals

	<i>Liver — unfit for food but suitable for pressing</i>	<i>Pancreas</i>	<i>Spinal Cords</i>
Cattle	36,800	12,029	5,644
Calves	—	115	—
Sheep	—	—	—
Pigs	—	—	50

Imported Meat — Condemnations

Decomposition	...	...	1,131 lbs.
Fibrosis	...	...	65 lbs.
Rodent contamination	...	...	25 lbs.
Souring	...	...	22 lbs.
Bruising	...	...	10 lbs.

Classified Summary of Inspections Carried out by Meat Inspectors.

Ante and post mortem examination of animals slaughtered 173,315

Post mortem examinations of animals dead on arrival or in
lairs 25

Inspections of country dressed carcasses 106

Re-inspections of home-killed meat 22

Detailed inspections of imported meat 38

Inspection of canned meats 56

Inspection of poultry and game 19

Inspections of meat carrying vehicles (Food Hygiene Regs.) 3,070

Inspections under Public Health Acts 48

176,699

Meat Inspection

The total weight of meat and offals condemned at the Abattoir and Meat Market was :—

109 tons, 10 cwts., 3 qrs., 19 lbs.

MILK

It is estimated that the quantity of milk consumed daily in the City is approximately 34,650 gallons, comprising :—

	<i>gallons</i>
Milk from farms in the city	500
Milk from farms within 25-30 mile radius ...	22,000
Milk from Distributing Depots	12,150
The 34,650 gallons are made up as follows :—	
Pasteurised Milk	25,350
Tuberculin Tested Pasteurised Milk	3,750
Tuberculin Tested Milk	150
Channel Island T.T. Milk	1,475
Sterilised Milk	3,925

Several complaints were received during the year respecting the dirty condition of milk bottles and one dairy was prosecuted for a snail in a bottle of milk and fined £5. In the other instances the dairies were cautioned and advised on inspection and control of bottle washing plants.

Approximately 1,600 gallons of milk were supplied daily to city schools, this being served to 38,400 children per day. The milk has been frequently sampled and submitted for chemical and bacteriological examination and the results have shown good standards of quality and cleanliness and safety throughout the year.

PURVEYORS OF MILK

Number of retail purveyors selling milk within the city :—

	1957	1958
(a) residing in the city	74	70
(b) residing outside the city	48	48
Number of retail purveyors selling bottled milk only from shop premises		
	420	408

During the year 616 inspections were made of dairies and milk shops and of milk vehicles.

All the dairies were inspected during the year and conditions were generally found to be satisfactory.

DESIGNATED MILK**The Milk and Dairies Regulations, 1949/54**

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949/53.

The Milk (Special Designation) (Raw Milk) Regulations, 1949/54.

Table setting out the number of licences issued during 1958.

Pasteurised Milk, Pasteurisers' Licences	7
Pasteurised Milk, Dealers' Licences	447
Sterilised Milk, Dealers' Licences	414
Tuberculin Tested Milk, Dealers' Licences	133

The seven pasteurisers' Licences issued include four licences to pasteurise milk by the H.T.S.T. Process and three by the holder process.

All the milk sold in the City with the exception of a small quantity of approximately 80-100 gallons of Tuberculin tested milk is either pasteurised, T.T. pasteurised, or sterilised.

Samples of milk were obtained frequently from all the processing dairies, and samples were also taken of sterilised milk processed outside the City and retailed here. Samples were submitted to the Public Health Laboratory, and the City Analyst for examination.

The number of samples submitted and the results obtained are set out below :—

<i>Designation</i>	<i>No. of Samples Obtained</i>	<i>No. Satisfactory</i>	<i>No. unsatisfactory.</i>			
			<i>Total Unsatisfactory.</i>	<i>By Methylene Blue Test.</i>	<i>By Phosphatase Test</i>	<i>By Turbidity Test</i>
Pasteurised	336	326	10	1	9	—
Pasteurised Channel Island	86	84	2	—	2	—
Pasteurised School	196	195	1	—	1	—
T.T. Pasteurised	186	182	4	1	3	—
T.T. Pasteurised Channel Island	60	60	—	—	—	—
Sterilised	224	224	—	—	—	—

During the year 56 samples submitted for the Methylene Blue test were reported void as the shade temperature was above 65°F.

1,088 samples of designated milk were obtained during 1958, as compared with 821 samples in 1957. The percentage of samples failing the prescribed tests was 1.56% compared with 2.5% in 1957.

In connexion with the unsatisfactory samples, each dairy was visited and the plant and equipment inspected and checked, the dairymen were advised and cautioned, and repeat samples taken.

ICE CREAM

Food and Drugs Act, 1955

Ice Cream (Heat Treatment, etc.) Regulations, 1947-1952

The number of premises registered for the manufacture, storage, and sale of ice cream within the city at the close of the year, together with comparative figures for recent years are as follows :—

	1955	1956	1957	1958
No. of premises registered for manufacture and sale	51	53	38	33
No. of premises registered for storage and sale only	749	790	819	877

During the year inspections of premises and vehicles were made and samples of ice cream submitted to the laboratory for examination for bacteriological cleanliness in accordance with the Ministry's provisional grades.

The samples were graded as follows :—

Grade 1	81	} Satisfactory
Grade 2	8	
Grade 3	4	} Unsatisfactory
Grade 4	2	

In connexion with the unsatisfactory samples investigations were made and the failures were found to be due to inefficient sterilisation of utensils, unsatisfactory storage, and methods of handling. In all cases the manufacturers' methods and premises were also examined and samples taken in course of production. Manufacturers and shopkeepers were advised about cleanliness and sterilisation.

It is interesting to note that the percentage of unsatisfactory samples is the lowest since the Ice Cream (Heat Treatment) Regulations, 1947, came into force.

Table of Comparison of Ice Cream Samples taken 1951-1958.

	No. of Samples	No. Satisfactory	No. Unsatisfactory	% Unsatisfactory
1951	142	112	30	21%
1952	221	165	56	25%
1953	116	92	24	21%
1954	85	54	31	37%
1955	73	63	10	14%
1956	15	10	5	33½%
1957	148	126	22	14·8%
1958	95	89	6	6·3%

Visits in Connection with Food Inspection

Food Shops	932
Food Preparing Premises	10
Abattoir	24
Food and Drugs	36
Other Premises	138
Cottagers Pigs	20
	<hr/>
Total :	1,160
	<hr/>

Visits to Premises

Dairies	501
Milk Shops (Personal Reg.)	78
Hawkers	41
Schools	13
Registered Shops (Fish Friers)	64
Registered Shops (Cooked Meats)	7
Registered Shops (Ice Cream)	232
Butchers Shops	352
Other Shops	757
Food Preparing Premises	588
Markets	89
Food Poisoning (Visits)	715
Food Poisoning (Re-visits)	96
Miscellaneous	1,954
Rivers, Stream, Brooks	575
	<hr/>
Total :	6,062
	<hr/>

FOOD AND DRUGS ACT, 1955

Premises registered under Section 16 of the Act for the Manufacture, Storage or Sale of Food

This section prohibits the use of premises for the manufacture or sale of the undermentioned foods unless the premises are suitable for the purpose and are duly registered by the local authority.

- (a) The sale or manufacture of ice cream or the storage of ice cream intended for sale ; or
- (b) The preparation or manufacture of sausages, potted, pressed, pickled or preserved food intended for sale. (The preparation of meat or fish by cooking is deemed to be the preservation thereof for this purpose).

Before registration is effected the premises must comply with the provisions of the Food Hygiene Regulations, 1955, which lay down certain requirements relating to structural conditions, suitability and cleanliness which must be observed in order to prevent contamination of the food produced or sold.

The number of registered premises under the Act is set out as follows :—

	1957.	1958.
Number of premises on register, 1st January	1214	1206
Number of premises added to register during the year.	44	203
Number of premises on register, 31st December	1206	1237

Classification of Premises Registered at close of year.

	1957.	1958.
Premises registered for the manufacture of ice cream	38	33
Premises registered for the storage and sale of ice cream	819	877
Premises registered for the preparation or manufacture of pressed, potted or preserved meat, etc.	212	172
Premises registered for the manufacture of sausages only	83	98
Premises registered for cooking of fish ...	54	57

COVENTRY CORPORATION ACT, 1948.

Sections 56 and 76

FOOD HAWKERS

This Act provides for the registration of all persons not keeping an open shop who sell, offer or expose for sale any food from any cart, barrow, or other vehicle or from any basket, pail, tray, or other receptacle. The premises used as storage accommodation for any food intended for sale from such vehicles or receptacles are also required to be registered. In December, 1958, the number of persons on the register was forty-eight, and in twenty-eight instances the premises were also registered.

During the year five applications were received from persons who wished to be registered as food hawkers. Registration was granted in each case.

BACTERIOLOGICAL EXAMINATION OF FOOD

During the year eleven samples of food were submitted to the Public Health Laboratory in connexion with cases of food poisoning and in respect of complaints from shops and canteens. The samples were varied and included brawn, beef stock, goose, soup powders, tinned cream, tinned meat, baby food, and roast pork. The bacteriologist reported that all the samples were satisfactory and no food poisoning organisms were isolated.

**Report on the Administration of the Food and Drugs Act, 1955, in
Relation to Sampling and Analysis of Food and Drugs for the Year
Ending 31st December, 1958.**

During the year 1,032 samples of food and drugs were submitted to the City Analyst, who certified 907 to be genuine, and 125 unsatisfactory.

Sampling under the Food and Drugs Act, 1955, reached the highest total ever obtained in the City. With 1,032 samples, the speed with which results of analysis were available was an important factor in the campaign. The fact that we have our own Public Analyst made no small contribution to this result. It should not be thought the increase in sample numbers was haphazard, indeed, the sampling was carefully planned and selective. The care given to these aspects is revealed in the number of samples found to be unsatisfactory by reason of adulteration, labelling and other contraventions. It is of importance to record the decrease in the percentage of samples found to be adulterated and the increase in labelling offences, together with the insidious forms of deficiencies discovered.

The samples detailed in the table below were collected in the following manner.

Formal Samples : 35. Informal Samples : 997.

Articles.	Total	Genuine	Unsatisfactory
Almonds Ground	3	3	...
Apples	4	1	3
Barley (Patent)	1	...	1
Beef (Potted)	1	1	...
Beer	1	1	...
Beetroot (Bottled)	1	1	...
Biscuits (Chocolate)	1	1	...
Biscuits (Butter)	5	2	3
Biscuits (Plain)	2	1	1
Brandy	1	1	...
Bread (Fortified)	1	1	...
Bread Rolls (Buttered)	1	1	...
Butterscotch	1	1	...
Butter	36	34	2
Buttered Nut Crunchies	1	...	1
Cake Mixture	16	10	6
Cake	1	...	1
Carrots	3	3	...
Cheese	2	1	1
Cheese Spread	2	2	...
Chicken	1	...	1
Chocolate (Rum)	2	2	...
Chicken (Minced)	2	2	...
Christmas Cake Decoration	1	1	...
Chocolate Pudding (Tinned)	1	1	...
Colouring Matter — Food	3	3	...
Coffee—Essence... ..	5	5	...
Coffee and Chicory Cubes	1	1	...
Coffee and Chicory Essence	5	5	...
Cream	6	6	...
Cream Horns	1	1	...
Cream Buns	1	1	...
Cream Doughnuts	1	...	1
Curry Powder	1	1	...
Cornflour	2	2	...
Crab Dressed	1	1	...
Custard Powder	5	5	...
Dessert Fillings	2	2	...
Fish — Creamed (Tinned)	1	1	...
Fish Paste	5	5	...
Fruit (Tinned Strained)	2	2	...
Flour (Plain)	8	6	2
Flour (S.R.)	7	6	1
Fudge (Buttered)	1	1	...
Gin	1	1	...
Ginger	1	1	...
Ginger Wine	1	1	...
Gravy	1	1	...
Herbs (Dried)	3	3	...
Ice Cream	8	7	1
Junkets	1	1	...
Lard	1	1	...
Lemon Juice	1	1	...
Lemon Essence	1	1	...
Lemon & Barley	2	2	...
Lemonade Powder	1	1	...
Liver & Bacon Paste	1	...	1
Margarine	4	4	...
Margarine (10% Butter)	6	5	1
Marmalade (Home Made)	1	1	...
Marzipan Almond	3	3	...
Meat Pastes	7	5	2
Medicines & Drugs	135	97	38
Mincemeat	4	4	...
Milk Powders (Skimmed)	1	1	...
Milks	554	522	32
Milk Shakes	7	7	...
c/fwd.	894	795	99

Articles.	Total	Genuine	Unsatisfactory
brought forward	894	795	99
Mint — Bottled...	2	2	...
Mushroom Ketchup ...	1	1	...
Mustard ...	1	1	...
Nutmeg — Ground ...	1	1	...
Oatmeal ...	1	1	...
Oranges (Tinned) ...	3	3	...
Orange Flavouring ...	1	1	...
Pastry Mixture ...	1	1	...
Peanuts ...	1	...	1
Pepper (White) ...	4	4	...
Pork ...	1	...	1
Pork (Minced) ...	2	...	2
Potatoes ...	6	6	...
Potato-Crisps ...	1	1	...
Pickles ...	2	2	...
Prunes (Tinned)...	1	...	1
Prunes ...	7	5	2
Pudding Christmas ...	1	1	...
Rice ...	1	1	...
Rhubarb ...	1	1	...
Rum ...	2	2	...
Salad Cream ...	1	1	...
Salmon (Tinned) ...	2	2	...
Salmon (Spread) ...	1	1	...
Salmon (Potted) ...	1	1	...
Sardines in Oil ...	1	1	...
Sauces ...	13	12	1
Sausage Meats ...	1	1	...
Semolina ...	2	2	...
Soft Drinks ...	13	12	1
Soups ...	15	14	1
Straws (Drinking—Flavoured)	7	2	5
Sugar (Brown) ...	6	1	5
Sugar (Granulated) ...	2	2	...
Sugar (Icing) ...	1	1	...
Sponge Drops (Dairy Cream)	1	1	...
Sponge Sandwich (Dairy Cream)	1	1	...
Sponge Jelly Mixture ...	1	...	1
Stewing Steak ...	2	1	1
Suet ...	1	1	...
Sweets (Buttered) ...	1	1	...
Table Jellies ...	11	8	3
Table Jellies (Crystals) ...	1	...	1
Tea ...	6	6	...
Treacle ...	1	1	...
Tuna (Tinned) ...	1	1	...
Turkey (Minced) ...	1	1	...
Whiskey ...	1	1	...
Vinegar ...	2	2	...
Totals	1,032	907	125

MILK

Thirty-two samples of milk were reported to be unsatisfactory during the year. Details of the samples and the action taken are set out below.

Twenty-four of these samples were reported by the Analyst to be unsatisfactory because the milks were low in solids not fat, but the freezing point test indicated that the milks were genuine. In the most serious deficiencies the farmers were asked to obtain advice from agricultural societies in order to improve the quality of their milk supply.

A pint bottle of Pasteurised milk was submitted to the Analyst, who reported the milk contained a small amount of added water. A visit was made to the dairy, and the laboratory records at the dairy were checked, when it was found that one farmer was sending in milk with low solids not fat content. Five informal samples were obtained, and all of the samples had solids not fat ranging from 7.85% to 8.37%, and two of the samples had a freezing point of below -0.530°C . Five formal samples were obtained, and the Analyst reported that three of the samples had a freezing point which indicated genuine milk. The other two samples contained added water of 1.2% and 2.41% respectively. An investigation at the farm revealed that the farmer used an in-churn cooler, and the farmer stated that after our visit he had tested the cooler and found a slight leak and had immediately purchased a new cooler. In these circumstances the farmer was cautioned, but no legal action was taken. Further samples of his milk taken on delivery to the dairy were found to be satisfactory.

Another pint bottle of Pasteurised milk was taken from a processing dairy, and the Analyst reported that the freezing point test indicated added water. Upon receipt of the result, 22 informal samples were taken from churns of milk on delivery to this dairy, and the Analyst reported that nine of the samples were deficient of solids not fat, but the freezing point test indicated that the milk was genuine. One other sample was found to be deficient of solids not fat and the freezing point test indicated added water. Investigation is still proceeding in this case.

A complaint was received at this Office that a bottle of milk contained a foreign body. On examination this was found to be a snail. The bottle was submitted to the Analyst to see if he could ascertain that a portion adhering to the side of the bottle was part of the snail in question. He reported that this was the foot of the snail, and the dairy concerned were prosecuted and fined £5.

OTHER FOODS

With respect to the remaining 93 samples of food other than milk found to be unsatisfactory, details of action taken are set out below.

Foods Found to be unsatisfactory by reason of Moulds, Rancidity, Infestation and Extraneous Matter.

Butter

A sample of butter was found to be contaminated with moulds. The shop in question was visited and the remainder of the butter surrendered and destroyed.

Buttered Peanut Crunch

In this case a complaint was received at this Office that these sweets contained maggots. The Analyst reported that the buttered peanut crunch was also rancid. Proceedings were instituted against the vendor, who was given a conditional discharge.

Biscuits

This sample was submitted for identification of a foreign body, and the Analyst reported that the foreign body consisted of cotton and jute fibres, possibly from sacking. The manufacturers of the biscuits were notified.

Blue Pork

A householder complained that the fat in some roast pork she had purchased was blue. Investigations were made at the butcher's shop where it was found that a side of pork had a blue tint throughout the fat. The butcher said that the pig had swallowed a marking pencil. A portion of the pork was submitted for analysis, and the Analyst reported that, in his opinion, the blue discolouration was due to an ingested artificial blue dye, possibly a pencil dye from the characteristics. The remainder of the side of pork was surrendered and destroyed.

Cake Mixture

Seven samples of cake mixtures were found to be contaminated with moulds. In two instances proceedings were instituted against the vendor in connection with the dirty condition of the shop premises, and in the remaining five instances the remainder of the stocks at the shops in question were surrendered and destroyed.

Cheese

This cheese was the subject of a complaint, and the Analyst reported that a light coloured portion of the cheese was paraffin wax. This had entered the cheese through a testing hole when the cheese was being sealed. The remainder of the cheese was inspected and found to be satisfactory.

Meat Paste

Three samples of meat paste were found to be affected with Tyrosine crystals, possibly due to long storage and the age of the product. In each case the remaining stocks were inspected and any

other meat pastes in a similar condition were surrendered and destroyed.

Patent Barley

This was a sample submitted for analysis, and the Analyst reported that the fat content of the barley was rancid, possibly due to prolonged or incorrect storage. The shop premises were visited, and the remainder of the stock surrendered and destroyed.

Peanuts

This sample was submitted for identification of the dirt content in the peanuts, and the Analyst reported that the sample contained no less than 15 pellets of rodent excreta, and the oil extracted from the peanuts was rancid. The vendor was prosecuted and fined £4.

Prunes

This was a large canteen pack of tinned American dried prunes, and was one of a consignment of tins at a local grocer's shop. The tins appeared to be slightly blown, and the Analyst reported that fermentation had taken place and rendered the prunes unfit for human consumption. All the blown tins were surrendered and destroyed, and the importers were notified in order that they could check further stocks in their warehouse.

Sugar

Five samples of brown sugar were submitted to the Analyst following a complaint from a householder that 1 lb. of brown sugar that she had purchased, contained dirt. The Analyst reported that all the samples of sugar contained an abnormally high degree of dirt and fibrous matter consisting of cotton and jute fibres, possibly from sacking. The Analyst's comments were sent to the packing company concerned, who replied the sugar in question was packed as received, and they did not consider that the amount of dirt found was excessive for this type of sugar.

Foods Found to be Contaminated with Arsenic, Copper, Iron, and Lead

Tinned Apples

This sample was the subject of a complaint from a day nursery that the apples had a blue discolouration. The analyst reported that the blue discolouration was due to iron salts, the lining of the can being faulty. The remaining tins of apples were examined at the day nursery, and found to be satisfactory.

Apples (Lebanese)

Two samples of apples were obtained from the wholesale market, and the Analyst reported that there was excess metallic contamination on both samples (lead 7.3 and 9.6 p.p.m., and arsenic 3.7 and 4.2 p.p.m.). The wholesaler was instructed to wash all the apples in a

weak solution of hydrochloric acid, and after this was carried out further samples were taken, and these proved to be satisfactory. The matter was reported to the Ministry of Agriculture Fisheries and Food, and the importers were also informed.

Marmalade

An informal sample of home-made marmalade was submitted to the Analyst, and he reported that the marmalade contained 6.4 p.p.m. of lead. The householder was informed of this result, and advised not to use the marmalade. The contamination was due to the container in which the marmalade had been prepared.

Sauce

An informal sample of sauce was found to contain 5.4 p.p.m. of lead, and 1.35 p.p.m. of arsenic. The manufacturers were notified of the Analyst's report, and investigations were carried out at the factory to ascertain the cause of the contamination. It was suggested that the lead and arsenic were possibly present in the natural foods used in the sauce.

Flavoured Drinking Straws

An informal sample of flavoured drinking straw was submitted to the Analyst, who reported that the straw contained 125 p.p.m. of lead. Upon receipt of this information further samples were obtained, and these were found to contain lead in quantities varying from 180 p.p.m. to 200 p.p.m. The manufacturers of the straws, the Ministry of Health, and the Ministry of Agriculture, Fisheries and Food (Food Standards Division) were all notified of these results. A meeting was arranged between representatives of the firm, the Chairman of the Health Committee, the Deputy Medical Officer of Health, the City Analyst, representatives of the Town Clerk's Department, and the Public Health Inspector. At this meeting, after statements of views of all concerned, it was agreed that if the firm undertook to withdraw existing stocks from sale, no publication of the information would take place, and the question of action in respect of the formal samples would be decided upon later. The solicitor for the firm in question agreed to this suggestion, and all existing stocks were withdrawn from sale. The product in question was put on the market again after a new source of paper had been obtained. Before this was marketed, samples were examined by our Analyst, who reported that the strawberry flavour straws contained lead 1 p.p.m., and the chocolate flavour straws contained 0.7 p.p.m. The lead found in the straws was present in the cardboard insert that was used as absorbent material to maintain the flavour.

Yeast Tablets

Three samples of yeast tablets were found upon analysis to be contaminated with lead and copper. The manufacturers were notified, and they explained that the excess lead and copper was probably in the yeast when obtained from breweries, but gave an assurance that every precaution was taken to avoid any excess contamination.

Foods and Drugs Found to be Deficient or in Excess of the Quantities Stated on the Label.

Cream of Magnesia

This was an informal sample, and the Analyst reported that it contained 12·7% excess of magnesium hydroxide. A letter was sent to the manufacturers notifying them of this fact.

Codis Tablets

The Analyst reported that a sample of Codis Tablets was deficient of 13% of the declared codeine phosphate. A letter was sent to the manufacturers calling their attention to this deficiency.

Formalin Tablets

Four informal samples of Formalin Tablets were submitted for analysis. In two instances the Analyst reported the tablets to be deficient of formaldehyde. In one instance the sample contained excess formaldehyde, and in the remaining sample the Analyst reported unsatisfactory weight variation. Formal samples were obtained in three cases, and found to be genuine, and in the remaining case this was reported to the Weights and Measures Inspector for any action he considered necessary.

Flour

Two samples of flour submitted for analysis were reported, and one was found to contain excreta, and the other to be deficient of iron. Formal samples obtained in these cases were found to be genuine.

Tincture of Iodine B.P.

The Analyst reported that a sample of Tincture of Iodine contained 16% excess iodine, and 19·2% excess potassium iodide over B.P. requirement. The manufacturers were notified of the Analyst's comments.

Orange Drink (Concentrated)

An informal sample of Orange Drink was found to be deficient of 40% of the required fruit content, (S.I. 1953, No. 1828). A formal sample was obtained, and found to be genuine.

Vitamins (Halibut and Cod Liver Oil Capsules, Phosphorine Tablets, Vitamin Tablets, and Cod Liver Oil Emulsion)

Eighteen samples of the above drugs containing vitamins were found to be unsatisfactory upon analysis. In the majority of the samples the unsatisfactory condition was due to a vitamin deficiency, and in other cases contraventions of the Labelling Orders were found. In all of the cases the manufacturers were notified, and in some the remainder of the stock was withdrawn from sale, whilst in others satisfactory explanations were received. In three cases where stock

was withdrawn from sale it was found that the products (cod liver oil capsules and cod liver oil emulsion) were over 3 years old, and the deterioration was due to the long storage.

Phosphorine and Jelly

Three samples of these drugs and food were found to be deficient of the weights stated on the labels, and the information was passed to the Weights and Measures Inspector.

Head and Stomach Pills, Backache Pills, Syrup of Figs

Six informal samples were obtained, and the Analyst reported that the labels were unsatisfactory. The manufacturers were notified and satisfactory explanations were received.

Tinned Prunes

Two samples of tinned prunes labelled in rich syrup did not, in the Analyst's opinion, contain rich syrup. The manufacturers were notified, and they replied that in their opinion the syrup was a rich syrup and as there is no legal standard they did not consider any contravention had been made.

Yeast Tablets, Cake Mixtures, Jellies, Tinned Meat, Stomach Powders

The labels of twelve samples of these foods and drugs were found to be unsatisfactory, and in each case the makers were notified and asked to make certain alterations in order to comply with the Labelling of Food Orders and the Food and Drugs Act.

SAMPLES FOUND TO BE ADULTERATED

Butter

An informal sample of butter was obtained and reported to contain 4.4% excess water ; a formal sample from the same vendor was found to be genuine.

Butter Biscuits

Three informal samples of butter biscuits were found to be deficient of butter fat as required in the Code of Practice. The manufacturers were notified of the results and satisfactory explanations were given with promises of stricter attention to the mixing and measuring of ingredients.

Ice Cream

An informal sample of ice cream was reported to be deficient of fat. The vendor was cautioned and advised, repeat samples were found to be satisfactory.

Cream Doughnuts

This was a formal sample, and the Analyst reported that the cream filling was synthetic cream. The vendor was prosecuted and the case was dismissed.

Margarine 10% butter

The Analyst reported that a sample of margarine with 10% butter contained 1.25% excess moisture. A formal sample was taken and found to be genuine.

Analysis of Sample Results — Total Samples 1,032.**Milk Samples — Total 554**

Percentage found to be adulterated	...	...	...	1.26%
Percentage found to be deficient of Solids not Fat	...	...	...	4.33%
Percentage found to contain foreign body	...	...	...	0.02%

Samples of Food and Drugs excluding Milk — Total 478

Percentage of samples found to have labelling offences, including deficiencies and excess of quantities stated...	9.81%
Percentage of samples found to be adulterated	1.88%
Percentage of samples found to be unsatisfactory by reason of moulds, rancidity, infestation, and extraneous matter.	4.4%
Percentage of samples found to be contaminated with lead, copper, arsenic and iron	2.92%

INSPECTIONS CARRIED OUT AT MARKETS, SHOPS AND STORES

During the year 4,585 inspections were made of markets, shops, and stalls, etc., where food is prepared, stored or exposed for sale. Of this number 1,603 visits were made for the purpose of examining food to ascertain its fitness or otherwise for human consumption. In the cases where food was found to be unfit it was surrendered by the owner and a surrender certificate issued. The surrendered foods were destroyed locally at the refuse destructor, except where they had some value as animal feed stocks.

The quantities of food surrendered as unfit during the year are set out below :—

Unsound Food**Total Weight of Food Surrendered.**

					<i>Tons.</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Meat	...	...	...	...	1	3	2	6
Fish	...	...	...	...	3	8	1	6
Poultry	...	...	...	...		10	0	2
Fresh Fruit and Vegetables	...	...	...	...	23	10	2	5
Other Foods	...	...	...	...	2	11	3	0½
					31	4	0	19½

CANNED FOODS

Meat ...	...	...	...	2,815 cans.
Fruit and Vegetables	...	...	...	10,833 cans
Other Foods...	...	...	...	3,766 cans

The meat referred to in this table is in addition to that condemned at the Abattoir.

FOOD HYGIENE REGULATIONS, 1955

During the year under review numerous inspections were carried out under the above Food Hygiene Regulations, and in fifteen instances proceedings were instituted, including contraventions under Regulations 5, 6, 8, 14, 18, 19, 23 and 29.

Certain of these contraventions were discovered at a small cafe. This cafe was in a disgusting condition, and was under Indian management. The occupier was fined a total of £17, with two guineas costs on eight summonses. In another instance a retail grocer's shop was found to contain unsound food, and upon an inspection being made, the rooms at the rear and the upstairs rooms were found to be in a dirty and mouse infested condition, and one room used as a food room also contained a water closet. In this case the occupier was fined £20. In many other instances contraventions were found, but these were remedied on the service of informal notices. Details of these are set out in another part of the report.

It is now three years since the Food Hygiene Regulations and the Food and Drugs Act, 1955, came into force, and on looking back over the past year it is evident in Coventry that there have been great improvements in food hygiene. This has not been achieved without hard work and perseverance, but results are encouraging. The total number of contraventions remedied, namely 438, are set out in a table below. This is 142 more than in 1957.

In spite of publicity and education about the Food Hygiene Regulations, it has been found necessary to institute legal proceedings in some cases. Details of these are set out under Magisterial Proceedings. However, this constant surveillance and attention to food premises appears now to be paying dividends. In two recent instances, Inspectors visited premises, and without service of any notices, one of the premises was redecorated throughout in twenty-four hours, and in the other instance work was commenced on redecoration within two days. Screening of cooked meats, cream cakes and pies, etc., now is getting to be usual practice in most shops. There are still a number of shops that have no screens, but these are becoming fewer.

The legal interpretation of some of the Regulations are causing us some concern, but we hope that as time passes amendments to the Regulations will appear, and also some High Court decisions will

give us guidance on certain debatable points, particularly with reference to screening of open food, and the provision of sinks and wash hand basins with hot and cold water.

Details of work carried out under the Food Hygiene Regulations, 1955

Number of Food Premises :

New ovens provided	...	...	...	2
Cleansed and redecorated	...	...	...	87
Structural repairs carried out	...	...	...	13
Lockers provided	...	...	...	7
Sinks provided	...	...	...	16
Wash hand basins provided	...	...	...	60
Hot water provided	...	...	...	68
Refrigeration provided	...	...	...	14
Screening of open food provided	...	...	...	48
Tables and counters covered with impervious material	...	...	...	18
Floors repaired or renewed	...	...	...	20
Accumulations of refuse removed and bins provided	...	...	...	20
Absence of First Aid Kit	...	...	...	19
Shop counters covered with impervious material...	...	...	...	14
Wash hand notices on water closet doors	...	...	...	22
Nail brushes provided	...	...	...	10
Total	...	...	...	438

HEALTH EDUCATION :—

Upon this subject the Chief Public Health Inspector writes as follows :—

...“Lectures to food handlers were again given, and all new entrants to the School Meals Service received instruction in the elements of food hygiene on a one day course. Similar instruction and also a review of environmental hygiene facilities were given to the Home Help Service. More than seven hundred other people were given talks by officers of the Department.

Lectures were also given during the year to various schools, and it is gratifying to note that interest in local services is increasing in what used to be, ivory towers of academic instruction. All requests for talks from outside organisations were met, and it is felt that great benefit can be gained from a well informed citizenry. A customer instructed in the requirements of the Food Regulations and demanding compliance from the shopkeeper could be a devastating supernumerary of the Public Health Inspectorate.

During 1958 more intensive inspection of food premises was possible due to rearrangement of duties. Some appalling conditions were discovered, and the necessary magisterial proceedings were instituted against the offenders. It is disturbing that conditions which

would be deplorable in a factory or workplace should be found in food premises. In many cases the excuse was offered that things had been allowed to drift between visits of inspectors, as though cleanliness was not to be practised for itself, but only in obedience of statute. It illustrates that regular inspection of premises by staff adequate enough to devote sufficient time to the inspection is still vitally necessary in spite of all the publicity given to clean food campaigns. There is still a considerable number of traders whose whole outlook is devoted solely to making money and with no desire to provide clean food from clean premises. It is perhaps illustrated best by the sad fact that the only trade which still uses a large amount of newspaper as wrapping material should be the last to use such a material. There is an adequate supply of clean cheap paper now available, and it can be only extreme parsimony that makes some traders not buy and use it.

Recently the first split in the defence against disease presented by the antibiotics became apparent. The re-emergence of the staphylococcus as a killing germ brought an anxious disquiet to those who have been neglecting old practices of hygiene and physical cleanliness. The advances in public health were first the result of hard work and tedious good habit, but, with the advent of wonder drugs, antibiotics, vaccines and inoculations, standards of hygiene and anti-sepsis have been allowed to deteriorate. Insidiously germs have been adapting themselves to uncongenial diets, and now the new mutation of the staphylococcus has become immune to penicillin. The lesson has been displayed, that it is better to remove germs with soap, disinfectant, and water than to control their multiplication after they have invaded the human body. To be free of disease is to be preferred to any miracle cure.

With food infections, however, the onset and course of disease is so rapid that drugs have little effect. The only prophylactic measure is that of absolute cleanliness. The task is the same that faced public health workers a century ago, and the slogan equally applicable — where there's dirt there's danger. The food hygiene talks have been given with the express purpose of hammering home that slogan, and to prove to people handling food that dirty habits produce bacteriologically filthy food.

New hazards are apparently to be faced nowadays with our food. Radioactivity is a menace yet to be revealed in its full evil intensity. The chemical treatment of crops to prevent plant disease has led to illness in the consumer. Arsenical poisoning has occurred, and is likely to recur if the present arsenical sprays continue to be used as indiscriminately as in the past. Insufficient research seems to be made into the possible effects on people consuming the foods. How many had suffered in spite of bland assurance that it was perfectly safe to eat following some limited laboratory tests upon control animals? This must not be allowed to occur with the spraying of crops. One remembers the sudden removal of refined mineral oil from the list of foodstuffs, following the discovery of its carcinogenic properties.

During the year an interesting sidelight on the necessity for the protection of foods from contamination comes from research on the effect of the ingestion of smoke particles. Recent investigation shows that there is an impressive link between heavy atmospheric pollution and the incidence of stomach cancer. A strong case can be made, based upon this information, for the protection of foods on display and certainly for the thorough washing of all foods capable of being washed before consumption.

The department was invited to provide a stand illustrating the control exercised by the Public Health Inspector over the milk supply, and this gave the department the opportunity of educating the public in the need for the return of clean milk bottles to the dairy. An awesome display of appallingly filthy bottles returned to local dairies drew responses ranging from horror to disbelief. One small visitor confidentially informed one of the staff that he knew the source of all those bottles — “from the garden of Mrs. — — down the road.” Exhibits showing the various designated milks and the tests to which they are subjected were shown, as was the control over the chemical quality of milk, and these proved especially useful for conducted groups of schoolchildren who provided the usual penetrating questions.

An innovation during the year was the “Welcome to Citizenship” exhibition for those who had reached the age of twenty-one and the ability to vote. A selective display of the department’s work was staged and provided a novel form of Health Education. The work of the Department in the fields of Housing, Clean Air, and Safe Food were shown, and aroused considerable interest. The electorate is our master, and it would be more inspiring to be the servant of a master who knew the nature of the task of the Public Health Inspector and appreciated its value, than to plod on dourly through what often seems a gloom of enervating apathy.”

MAGISTERIAL PROCEEDINGS

Magisterial proceedings were instituted in fifty-nine instances. In cases involving the service of eleven summonses in respect of contraventions of Section 2 of the Food and Drugs Act, 1955, ten of the summonses were proved and fines totalling £27 were imposed. The remaining summons served under this Section, although proved, was dismissed.

Seven summonses were served in respect of contraventions of Section 6 of the Food and Drugs Act, 1955. These related to the false labelling of fish exposed for sale, and total fines of £9 were imposed in six instances. One summons was dismissed. Under Section 8 of the Food and Drugs Act, 1955, a total of twenty-four summonses were served. Of these, nine were in respect of unfit food, which was either deposited or exposed or in the possession for the purpose of sale of the defendants, and fines and costs amounting to £29 5s. 0d. were imposed. Fifteen summonses related to articles of

food, which were sold when unfit for human consumption. Fines and costs amounting to £72 12s. 0d. were imposed upon the defendants. One summons served in respect of unfit food found in the possession of a shop keeper for the purpose of sale was dismissed by the Magistrates. Fourteen summonses were served in respect of non-compliance with statutory abatement notices under Sections 92 and 93 of the Public Health Act, 1936, concerning statutory nuisances found to exist in dwelling houses. The Magistrates made an order in three instances requiring the work to be done within a specified period. In three instances the cases were adjourned, the work being in progress at the date of the Court hearing, and subsequently completed in the period of adjournment. In the remaining eight instances the statutory nuisances were abated by the time the defendants were required to attend Court, and the Magistrates allowed the summonses to be withdrawn.

Four summonses were granted in respect of non-compliance with statutory notices served under Section 45 of the Public Health Act, 1936. Fines totalling £6 10s. 0d. were imposed in three instances, and one summons was adjourned and the work was completed within the time allowed by the Court. Six summonses were served in connexion with contraventions of Section 39 of the Public Health Act, 1936. Of these, one was proved, and a fine of £2 10s. 0d. was imposed ; three were granted an adjournment and two were allowed by the Magistrates to be withdrawn in view of the work required having been completed.

Magisterial proceedings were also taken under Section 236 of the Public Health Act, 1936, in respect of premises being kept as a common lodging house by a person not registered in accordance with the Act. A fine of £1 was imposed. A summons was served in respect of a contravention of Article 7 A B (C) of the Labelling of Food Order, 1953, in that margarine stated to contain 10% of butter was found to be deficient of butter to the extent of 48 per cent. The defendant was fined £5 and two guineas costs.

Contraventions of the Food Hygiene Regulations, 1955 were found to exist at four separate premises and twenty summonses were served in respect of them. The contraventions related to (a) insanitary premises, (b) failure to protect food from risk of contamination, (c) failing to keep clean and in proper condition equipment used in a food business, (d) absence of hot water, (e) failing to keep clean and in efficient order sanitary conveniences, (f) using a room containing a sanitary convenience as a food room, (g) failing to keep clean the walls, floors and ceilings of food rooms, (h) the absence of hand washing notices near to and the absence of sufficient light in sanitary conveniences, (i) absence of a first aid kit, (j) smoking in a room containing open food, (k) absence of suitable and sufficient cupboard or locker accommodation for clothing.

In the case of one premises, which involved the service of seven summonses, the Magistrates found the summonses proved, and imposed fines amounting to £17 with £2 2s. 0d. costs. Moreover, in

announcing the bench's decision, the presiding magistrate stated that in reply to a plea for leniency, made on behalf of the defendant, it would be apparent from the fines which they were imposing, that considerable leniency had been shown. He pointed out that the maximum penalties, which could be imposed, were very serious. He remarked " epidemics do break out, and we all know how easily that can happen and how they can spread." The presiding magistrate added that great credit was due to the Department for the enforcement of the Regulations, and, in this case particularly, for the way in which the case had been prepared. He went so far as to say that he had never heard of a case like this, which had been better prepared.

In the three other cases taken under the Food Hygiene Regulations, fines totalling £39 were imposed, two summonses, those relating to the absence of a first aid kit and smoking in a room containing open food were dismissed.

The first case of its kind to be taken in Coventry under Section 1 of the Clean Air Act, 1956, for the emission of dark smoke in excess of Ringelmann 2 was brought before the Magistrates, and a fine of £5 was imposed.

Eight summonses were served in respect of contraventions of Article 4 (d) of the Byelaws relating to the handling, wrapping and delivery of food in the City. These Byelaws were made under Section 13 of the Food and Drugs Act, 1938, and continue in force by virtue of the provisions of the Twelfth Schedule to the Food and Drugs Act, 1955. The Article in question requires the interior of every vehicle from which food is delivered to be kept in a clean condition. All the summonses were proved and fines to the total of £24 were imposed.

FACTORIES ACTS, 1937 AND 1948

Factories.

The following tables, which are inserted in compliance with Section 128 of the Factories Act, 1937, show the number of factories in the City and inspections carried out.

No serious contravention of the Act was observed, and factory owners have been very co-operative with the Department. The forty-one premises mentioned in part three of the first table were building operations mainly on new housing sites.

TABLE 1 — INSPECTIONS

Premises	Number on Register	Number		
		Inspections	Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 of the 1937 Act are enforced by local authorities	49	12	3	...
2. Factories not included in 1, in which Section 7 of the 1937 Act is enforced by local authorities	1,068	378	70	...
3. Other premises in which Section 7 of the 1937 Act is enforced by local authorities (excluding outworkers' premises)	41	38	22	...
	1,158	428	95	...

TABLE 2 — DEFECTS

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (Sec. 1)	1	...	...	1	...
Overcrowding (Sec. 2) ... ..	...	...	...	...	...
Unreasonable temp. (Sec. 3)	...	...	...	...	...
Inadequate ventilation (Sec. 4)	2	...	...	...	...
Inefficient drainage of floors (Sec. 6) ...	...	...	...	...	...
Sanitary conveniences (Sec. 7)					
(a) Insufficient	1	1	...	1	...
(b) Unsuitable or defective ...	91	54	...	32	...
(c) Not separate for sexes ...	...	...	...	...	...
Other offences against the Acts (Not including offences relating to outwork) ... ..	...	...	5	...	...
Totals	95	55	5	34	...

Outworkers

During the year ten lists were received in accordance with Section 110 of the Factories Act, 1937, from firms employing outworkers residing in the City. Of these, seven lists were received in the August return and related to eighty-seven outworkers who were employed as follows :—

Making, altering or cleaning of wearing apparel ...	23
Household linen	29
Making of cardboard boxes	18
Carding, etc.	16
Making of Lampshades	1

No contravention of the Act relating to outworker's premises was observed during the year.

Bakehouses

During the year under review no bakehouse was discontinued and none was erected. This was not in keeping with the general trend over the past few years, as during that time many of the smaller types of bakehouses, especially those producing bread only were closed down.

Of the thirty-six existing bakehouses, four have a large output mainly of bread, and supply most of the City's needs. The remaining thirty-two bakehouses produce very little bread, their main production being flour confectionery.

It was found necessary in ten instances to call the occupier's attention to contraventions of the Food Hygiene Regulations, 1955. Generally a high standard of cleanliness is maintained and where contraventions were observed they were of a minor character ; on the whole the occupiers of the bakehouses are very co-operative with the Department.

The table below shows the number of bakehouses in the City and the inspections carried out during the year.

Number on register January, 1958	36
Number closed during the year	Nil
Number of changes of occupation	Nil
Number of new bakehouses opened during the year	Nil
Number on register December, 1958	36
Number of inspections carried out during 1958 ...	188

PREVENTION OF DAMAGE BY PESTS ACT, 1949

For the Year 1958-1959.

In accordance with the requirements of the Prevention of Damage by Pests Act, 1949, the work of rodent control has been continued throughout the year 1st April, 1958, to 31st March, 1959, by the Rodent Officer and the Rodent Operatives.

Complaints by occupiers have been investigated and treatment carried out where necessary. During the year survey inspections were made and infestations dealt with forthwith.

The work carried out by the rodent control staff is enumerated in the following tables :—

TABLE I. Investigations and Cases dealt with by the Rodent Officer.

No. of complaints of rodent infested premises investigated	...	...	651
No. of premises found to be infested (Dwelling Houses)	...	...	420
(Business Premises)	...	...	38
(Local Authority)	...	...	43
No. of visits to infested premises and for purposes of survey	...	...	1,590
No. of cases where rats gained access to buildings from defective drains	...	...	54
No. of defective drains remedied	...	...	50
No. of drains examined	...	...	143
No. of premises cleared of infestation	...	...	205

TABLE II. No. of Cases dealt with and work carried out by Departmental Rodent Operatives.

No. of complaints investigated	...	...	...	...	2,419
No. of premises inspected by survey (Dwelling Houses)	...	...	...	...	772
(Business Premises)	...	...	...	...	13
(Local Authority)	...	...	...	...	14
No. found to be infested (Dwelling Houses)	...	...	...	...	1,671
(Business Premises)	...	...	...	...	169
(Local Authority)	...	...	...	...	109
No. of visits and revisits to treat infestation (Dwelling Houses)	...	...	...	...	6,530
(Business Premises)	...	...	...	...	615
(Local Authority)	...	...	...	...	554
No. of infestations treated	...	...	...	...	1,949
No. of infestations cleared	...	...	...	...	1,816
No. of warfarin baits laid	...	...	...	...	19,023
No. of instances where gas was used	...	...	...	...	Nil
No. of carcasses found following treatment	...	...	...	...	582

The work of systematically baiting the sewers with poison was carried out as far as possible during the year. In this connexion a first maintenance treatment of seventeen sections and a second maintenance treatment of eight sections of the City's main sewerage system were completed.

First Maintenance Treatment

No. of sewer manholes baited	...	...	...	722
No. of sewer manholes where poison baits were taken	...	...	...	232
No. of sewer manholes where no baits were taken	...	...	...	490

Second Maintenance Treatment

No. of sewer manholes baited	...	...	...	328
No. of sewer manholes where poison baits were taken	...	...	...	144
No. of sewer manholes where no baits were taken	...	...	...	184

TIPS**Wyken, Baginton, Whitley, Longford**

Inspections of the above-mentioned refuse tips were carried out at monthly intervals, and any infestations found were dealt with successfully. The routine inspections will be continued and a maintenance treatment carried out whenever necessary.

PET ANIMALS ACT, 1951

Twenty-two pet shops licences were granted during the year. Of these, eighteen licences were granted in the form of renewals in respect of existing pet shops. Four new pet shops were established for which licences were granted. One application for a licence to keep a pet shop was refused by the Health Committee on the grounds that the proposed premises were totally unsuitable for the purpose. One pet shop was closed during the year. Before any premises are reported upon to the Health Committee for the granting of a licence the opinion of the Chief Fire Officer as to the security of the premises against fire is obtained.

Twenty-eight visits to pet shops were made for the purpose of ensuring that the licence conditions were fully observed.

COVENTRY CORPORATION ACT, 1948, SECTION 57**Hairdressers' and Barbers' Premises**

The provisions of Section 57 of this Act require that "every person who carries on the trade or business of a hairdresser or barber within the city shall register his name and place of abode and also the premises in which such trade or business is carried on in a book to be kept at the offices of the Corporation for the purpose." Moreover, the Corporation have made Byelaws under the powers granted by this section with the object of securing

- (a) the cleanliness of any premises so registered and of the instruments, towels, materials and equipment used therein, and
- (b) the cleanliness of persons employed in such premises in regard to both themselves and their clothing.

It is a condition of registration that a copy of the Byelaws made under this section is displayed in the registered premises.

This enactment is administered through the Public Health Inspectorate, and during the year under review a survey of hairdressers' and barbers' premises established in the city was made. The survey was carried out with a two-fold purpose, namely, to ensure that a satisfactory standard of hygiene is being maintained in accordance with the requirements of the Byelaws, and to complete the records of all premises for which registration is necessary to conform with the Act.

With these objects in view one hundred and eighty-six premises were inspected, and detailed information concerning the premises, instruments, equipment and persons employed was obtained. Of the premises inspected it was found that in twenty-seven instances, or 14·5%, the Byelaws were not being fully complied with. At seventeen premises there was no covered receptacle in which to place trimmings. It was observed that sterilization was not carried out in eleven instances, although the instruments were apparently clean, and there were eight others where the instruments were not cleansed after use on each customer. In five cases the general standard of hygiene was low, and there were also five premises where structural or decorative work was found to be necessary. The Byelaws were not displayed in twenty-six premises as required by the Act, although copies had previously been supplied, and seventeen occupiers had mislaid the copy of the Byelaws provided to each of them. Of the eighty-nine contraventions of Section 57 of the Coventry Corporation Act, 1948 and the Byelaws, which were found to exist, in eighteen premises more than one contravention was observed.

The contraventions were brought to the attention of the occupiers in the appropriate cases, and while they were remedied forthwith in some instances, in others remedial action was undertaken without undue delay. Written intimations were addressed to the occupiers in certain instances, and conformity with the local Act was achieved at all premises without recourse to more stringent action. There were two hundred and forty-five hairdressers' and barbers' premises recorded in the register at the year end.

STATISTICAL TABLES AND CHARTS.

	Page
CAUSES OF AND AGES AT DEATH	166
VITAL STATISTICS OF CITY	
During 1958 and previous years	167
COMPARATIVE VITAL STATISTICS	
over a period of 10 years for Coventry, the large towns, and of England and Wales	168
INFANT MORTALITY During 1958	169
Chart showing Infant Mortality per 1,000 Live Births in Coventry, 1933—1958	170
VITAL STATISTICS	
Historical Summary	171
COMPARATIVE STATISTICS OF THE WARDS ..	172
VENEREAL DISEASES	173—174
TUBERCULOSIS	
Live Register for 1958	175
Summary of Cases on Register	175
,, Cases notified	175
,, Deaths notified	175
During 1958 and previous years	175
CASES OF INFECTIOUS DISEASES NOTIFIED	176
DEATHS	
Chart showing principal causes to Total Deaths ..	177
METEOROLOGICAL OBSERVATIONS	179
Rain, Sunshine	178

CAUSES OF AND AGES AT DEATH, YEAR 1958

CAUSES OF DEATH.		Total Deaths 1958			Under 1 year	1 and under 5.	5 and under 15.	15 and under 45.	45 and under 65.	65 and upwards.	Deaths in C. & W. Hosp.	Deaths in Gulson Hosp.	Deaths in other Institutions
		Males	Females	Total									
1.	Tuberculosis Respiratory	21	6	27	1	—	—	4	11	11	1	5	11
2.	Tuberculosis Other ...	1	0	1	—	—	—	—	—	1	—	—	1
3.	Syphilitic Disease ...	4	3	7	—	—	—	—	2	5	—	—	—
4.	Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—
5.	Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—
6.	Meningococcal Infection	2	1	3	2	—	—	1	—	—	—	1	2
7.	Acute Poliomyelitis ...	1	0	1	—	—	—	—	1	—	—	—	1
8.	Measles ...	—	—	—	—	—	—	—	—	—	—	—	—
9.	Other Infective and Parasitic Diseases ...	—	—	—	—	—	—	—	—	—	—	—	—
10.	Malignant Neoplasm, Stomach ...	36	32	68	—	—	—	3	20	45	3	6	10
11.	ditto Lung, Bronchus ...	92	14	106	—	—	—	3	57	46	7	5	28
12.	ditto Breast ...	—	41	41	—	—	—	4	23	14	3	3	10
13.	ditto Uterus ...	—	21	21	—	—	—	4	6	11	—	1	3
14.	Other Malignant and Lymphatic Neoplasms	124	98	222	2	2	2	19	71	126	31	27	40
15.	Leukaemia, Aleukaemia	5	11	16	—	—	1	3	8	4	1	4	7
16.	Diabetes ...	8	11	19	—	1	—	1	7	10	2	9	2
17.	Vascular Lesions of Nervous System ...	164	172	336	—	1	—	10	66	259	12	44	80
18.	Coronary Disease, Angina	314	163	477	—	—	—	18	143	316	29	51	55
19.	Hypertension with Heart Disease ...	39	33	72	—	—	—	1	6	65	8	8	25
20.	Other Heart Disease ...	128	164	292	1	—	—	9	46	236	17	26	40
21.	Other Circulatory Disease	40	43	83	—	—	—	4	17	62	8	10	13
22.	Influenza ...	7	5	12	1	—	—	—	5	6	—	—	—
23.	Pneumonia ...	73	50	123	35	2	1	2	24	59	10	33	27
24.	Bronchitis ...	83	38	121	2	—	—	2	29	88	9	8	13
25.	Other diseases of Respiratory System	17	7	24	—	—	1	1	5	17	1	7	5
26.	Ulcer of Stomach and Duodenum ...	16	2	18	—	—	—	1	5	12	1	6	1
27.	Gastritis, Enteritis and Diarrhoea ...	3	4	7	2	2	—	—	1	2	—	1	3
28.	Nephritis and Nephrosis	11	8	19	—	—	—	8	4	7	3	3	3
29.	Hyperplasia of Prostate	13	0	13	—	—	—	—	—	13	3	2	3
30.	Pregnancy, Childbirth, Abortion ...	0	1	1	—	—	—	1	—	—	—	—	1
31.	Congenital Malformations ...	21	14	35	31	1	—	2	1	—	6	23	4
32.	Other Defined and Ill-Defined Diseases ...	96	96	192	75	3	1	12	40	61	40	84	25
33.	Motor Vehicle Accidents	32	10	42	—	1	4	18	8	11	21	1	—
34.	All Other Accidents ...	23	29	52	3	2	2	8	8	29	17	1	—
35.	Suicide ...	24	8	32	—	—	—	13	13	6	—	1	—
36.	Homicide and Operations of War ...	2	1	3	1	—	—	1	1	—	—	—	—
TOTALS ...		1400	1086	2486	156	15	12	153	628	1522	233	370	427

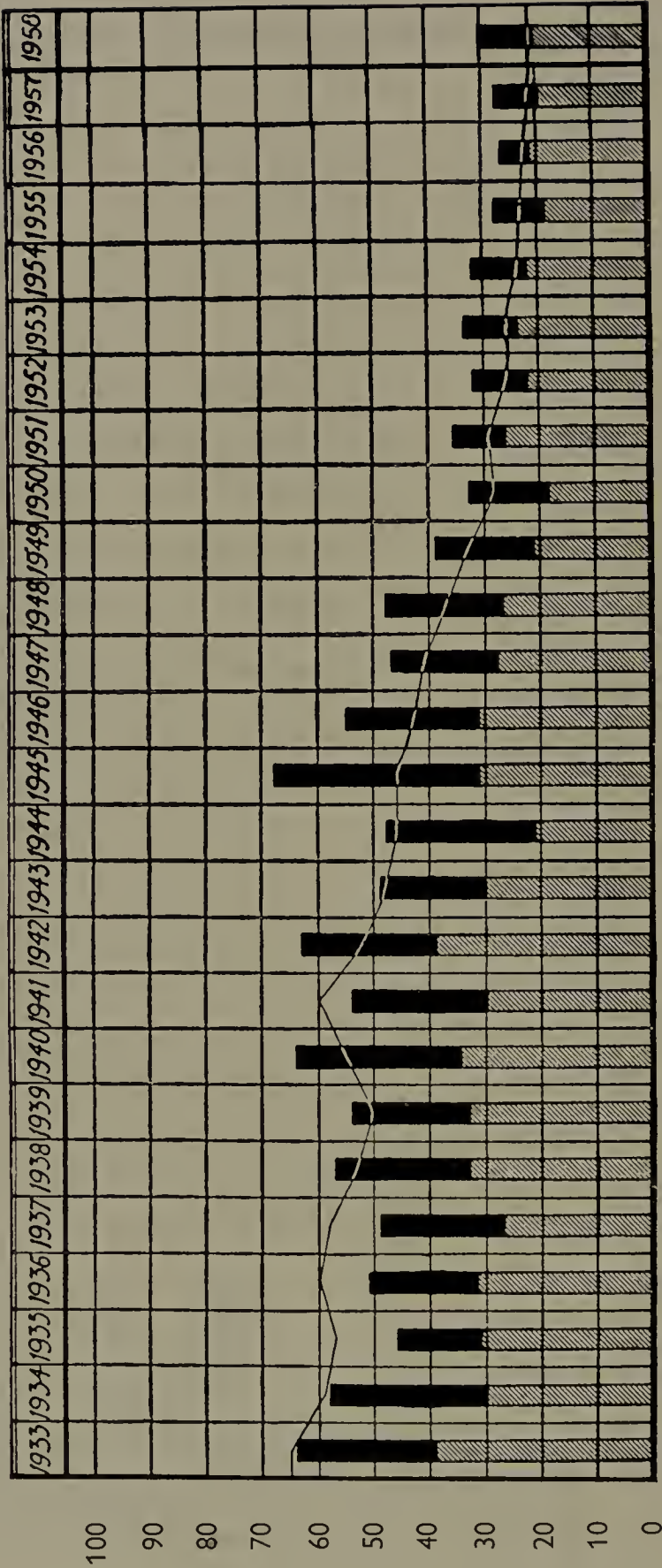
YEAR.	Population estimated to middle of each year.	BIRTHS			TOTAL DEATHS REGISTERED IN THE CITY.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE CITY.			
		Un-corrected Number	Nett		Number	Rate per 1,000 population.	of Non-residents registered in the City.	of Residents not registered in the City.	Under 1 Year of Age.		At all Ages.	
			Number	Rate per 1,000 population.					Number	Rate per 1,000 Net Births	Number	Rate per 1,000 population.
1934	184,900	2,585	2,521	13.6	1,865	10.0	125	116	144	57.1	1,856	10.0
1935	190,000	2,843	2,750	14.4	1,852	9.7	120	112	128	46.5	1,844	9.7
1936	192,360	3,009	2,912	15.1	1,960	10.1	100	101	151	51.8	1,961	10.1
1937	206,500	3,306	3,254	15.7	2,154	10.4	126	128	158	48.5	2,156	10.4
1938	219,900	3,724	3,624	16.5	2,074	9.4	139	156	208	56.0	2,091	9.5
1939	234,000	4,155	4,155	17.7	2,179	9.3	100	129	227	54.6	2,208	9.4
1940	229,400	3,973	3,973	16.4	3,157	13.0	238	298	248	63.0	3,217	13.3
1941	193,070	3,301	3,301	17.1	2,097	10.1	142	670	156	54.8	2,483	12.8
1942	207,200	3,996	3,996	19.3	1,617	8.0	59	577	249	62.3	2,076	10.2
1943	214,870	4,889	4,889	21.2	1,683	7.3	57	593	244	49.9	2,219	9.6
1944	220,400	5,466	5,466	22.8	1,664	6.9	81	583	265	48.4	2,166	9.0
1945	221,970	4,949	4,949	22.2	1,847	8.3	68	569	338	68.2	2,348	10.5
1946	232,850	4,326	5,225	22.4	1,856	7.9	69	562	284	54.3	2,349	10.0
1947	242,860	4,787	5,643	23.2	2,051	8.4	126	503	255	45.1	2,428	9.9
1948	250,400	4,249	5,101	20.3	1,803	7.2	65	489	232	45.5	2,227	8.8
1949	254,900	3,931	4,743	18.6	1,862	7.3	71	552	187	39.4	2,414	9.4
1950	256,800	3,596	4,450	17.3	1,864	7.3	113	569	145	32.6	2,433	9.4
1951	258,100	3,576	4,326	16.7	2,176	8.4	99	608	154	35.6	2,685	10.4
1952	261,000	3,389	4,159	15.9	1,836	7.0	94	605	132	31.7	2,347	8.9
1953	263,000	3,524	4,250	16.1	1,952	7.4	88	373	142	33.4	2,237	8.5
1954	264,600	3,465	4,171	15.76	1,938	7.3	100	336	127	30.4	2,174	8.2
1955	267,300	3,576	4,300	16.09	2,133	8.0	123	314	120	27.9	2,324	8.7
1956	272,600	3,876	4,640	17.02	2,131	7.8	118	241	124	26.7	2,254	8.3
1957	277,300	4,099	4,925	17.76	2,016	7.3	116	320	141	28.6	2,220	8.0
1958	281,000	4,395	5,164	18.38	2,027	7.2	118	577	156	30.2	2,486	8.8

**Table of Comparative Vital Statistics over a period of ten years
for Coventry and England and Wales.**

	BIRTH RATE		DEATH RATE		INFANTILE MORTALITY RATE	
	Coventry	England and Wales	Coventry	England and Wales	Coventry	England and Wales
1949	18·6	16·7	9·4	11·7	39	32·4
1950	17·3	15·8	9·4	11·6	33	29·6
1951	16·7	15·5	10·4	12·5	36	29·7
1952	15·9	15·3	8·9	11·3	32	27·6
1953	16·1	15·5	8·5	11·4	33	26·8
1954	15·76	15·2	8·2	11·3	30	25·4
1955	16·09	15·0	8·7	11·7	28	24·9
1956	17·02	15·6	8·3	11·7	27	23·7
1957	17·76	16·1	8·0	11·5	29	23·1
1958	18·38	16·4	8·8	11·7	30	22·5

CAUSE OF DEATH.	Under 1 Day	1—2 Days	2—3 Days	3—4 Days	4—5 Days	5—6 Days	Total under 1 Week	1—2 Weeks	2—3 Weeks	3—4 Weeks	Total under 1 Month	1—2 Months	3—6 Months	6—9 Months	9—12 Months	Total Deaths under One Year.
All Causes { Certified ... Uncertified	52 3	12	10	4	4	5	87 3	3	7	6	103 3	18	17	9	6	153 3
Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenza ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Tuberculosis of Nervous System ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of Intestines and Peritoneum ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Syphilis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Convulsions ...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Bronchitis ...	—	—	—	—	—	—	1	2	5	1	2	11	4	2	1	2
Pneumonia ...	—	1	1	1	1	4	8	—	—	—	17	—	—	—	—	35
Other Respiratory Diseases	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	2
Inflammation of Stomach	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea and Enteritis	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	2
Hernia : Intestinal	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Obstruction	—	3	3	2	2	—	19	—	—	1	20	4	3	2	2	31
Congenital Malformations	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Debility and Sclerema ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Icterus ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Premature Birth ...	33	3	2	1	1	1	41	1	—	—	42	—	—	—	—	42
Injury at Birth	5	—	2	—	—	—	7	—	—	—	7	—	—	—	—	7
Diseases of Umbilicus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Atelectasis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suffocation in Bed and not stated ...	1	1	1	—	—	—	3	—	—	—	3	—	—	—	—	3
Other Causes	7	4	—	—	—	—	11	—	1	2	14	3	6	3	3	29
TOTAL, ALL CAUSES	55	12	9	5	4	5	90	3	7	6	106	18	17	9	6	156

CHART SHOWING INFANT MORTALITY PER 1,000 BIRTHS IN COVENTRY



The Infant Death Rate per 1,000 births is represented by the chimneys, the shaded portion of which represents the death rate amongst babies under four weeks of age (*i.e.*, the neo-natal death rate).

The Infant Death Rate for England and Wales is represented by the line.

VITAL STATISTICS. (Historical Summary).

Year	Houses Inhabited (December)	Vacant.	Popula- tion (Mid-year)	Mortality	Infectious Mortality	Deaths under one year per 1000 born.	Birth Rate
1801	2,930	—	16,034	—	—	—	—
1811	3,448	*60	17,923	—	—	—	—
1821	3,729	*114	21,448	—	—	—	—
1831	5,444	*421	27,298	—	—	—	—
1841	6,531	*590	31,032	—	—	—	—
Ten Years' Average.							
1851	7,783	*151	36,812	27	—	—	—
1861	8,991	*1,026	40,936	25	—	—	—
1871	8,535	*816	37,670	22	—	—	—
1881	9,239	*643	42,111	20	3·3	150	35·4
1891	11,465	*284	52,724	18·5	1·7	142	32·0
1901	15,571	353	69,978	16·96	1·9	153·7	29·8
1911	23,515	95	106,349	13·7	1·4	109·3	28·0
1921	28,355	502‡	128,157	11·3	0·7	83·6	23·2
1931	41,275	917‡	167,083	10·1	0·2	67·7	15·7
1951	—	—	258,211	10·7	0·17	52·4	18·0
1897	†12,440	73	61,234	16·8	1·8	157	31·3
1911	23,515	95	107,287	13·3	2·08	109·8	26·9
1912	24,590	50	111,166	11·9	1·35	76·1	26·4
1913	25,051	113	115,064	11·4	0·84	91·6	26·0
1914	25,860	99	119,003	11·7	0·70	84·6	26·9
1915	26,667	56	122,982	12·9	1·39	87·8	23·8
1916	27,366	12	127,089	10·9	1·23	87·5	23·5
1917	27,531	15	130,000	10·4	0·47	78·5	20·2
1918	27,735	25	133,000	14·6	0·42	92·5	20·7
1919	27,829	20	136,000	9·3	0·32	82·8	18·2
1920	27,973	48	130,000	9·8	0·35	76·0	25·0
1921	28,355	502‡	128,157	10·2	0·25	79·3	22·1
1922	28,661	72	129,000	10·6	0·34	70·4	18·9
1923	29,414	40	130,500	9·3	0·20	64·9	16·9
1924	29,685	90	132,000	9·6	0·19	79·4	16·0
1925	30,199	83	133,500	10·6	0·30	77·1	16·3
1926	31,034	111	135,000	9·7	0·15	68·9	15·7
1927	32,260	151	139,000	10·2	0·23	63·4	14·8
1928	38,474	175	161,600°	9·6	0·34	65·7	14·4
1929	39,374	750	163,700	12·1	0·63	73·1	14·8
1930	40,519	800	165,800	10·1	0·32	57·0	14·5
1931	41,275	917	168,900	10·0	0·10	57·7	14·8
1932	45,781	1,000	182,000	9·4	0·33	69·7	13·5
1933	47,175	1,000	184,500	9·9	0·21	64·5	13·4
1934	48,730	1,500	184,900	10·0	0·17	57·1	13·6
1935	50,622	1,854	190,000	9·7	0·16	46·5	14·4
1936	54,273	1,361	192,360	10·1	0·20	51·8	15·1
1937	57,888	1,606	206,500	10·4	0·18	48·5	15·7
1938	61,580	1,316	229,900	9·5	0·13	56·0	16·5
1939	—	—	—	9·4	—	54·6	17·7
1940	—	—	229,400	13·3	0·11	63·0	16·4
1941	—	—	193,070	12·8	0·21	54·8	17·1
1942	—	—	207,200	10·2	0·07	62·3	19·3
1943	—	—	214,870	9·6	0·23	49·9	21·2
1944	65,926	—	220,400	9·0	0·24	48·4	24·8
1945	—	—	221,970	10·5	0·30	68·2	22·2
1946	—	—	232,850	10·0	0·32	54·3	22·4
1947	68,900	—	242,860	9·9	0·18	45·1	23·2
1948	69,950	—	250,400	8·8	0·10	45·5	20·3
1949	70,550	—	254,900	9·4	0·11	39·4	18·6
1950	71,720	—	256,800	9·4	0·06	32·6	17·3
1951	72,497	—	258,100	10·4	0·03	35·6	16·7
1952	73,828	265	261,000	8·9	0·05	31·7	15·9
1953	76,150	157	263,000	8·5	0·04	33·4	16·1
1954	76,458	95	264,600	8·2	0·015	30·4	15·76
1955	79,369	400	267,300	8·7	0·026	27·9	16·09
1956	82,089	500	272,600	8·3	0·007	26·7	17·02
1957	84,000	750	277,300	8·0	0·032	28·6	17·76
1958	86,400	800	281,000	8·8	0·014	30·2	18·38

*This number includes all business offices, whether in dwelling houses or factories not occupied on the night the Census was taken.

†This number omits all business offices, factories, etc.

‡The Census returns show unoccupied "dwellings"—not houses.

In these years an extension of the City Boundaries took place.

Comparative Statistics of the 16 wards in the City for 1958

WARDS	R.G's Estimated Population, 1958	Acreage	Density per Acre	Number of Deaths Registered	Death Rate, 1958	Number of Births, *Registered in City	Birth rate for 1958	Number of Deaths under 1 year of age	Infantile Death Rate for 1957. (Per 1,000 Births).
Bablake ...	17,408	1,463	11.9	100	5.7	177	10.2	1	5.6
Charterhouse and Binley	18,482	2,173	8.5	155	8.4	489	26.5	10	20.4
Cheylesmore	16,926	1,056	16.0	122	7.2	243	14.3	9	37.0
Earlsdon ...	14,993	1,908	7.9	159	10.6	165	11.0	3	18.2
Foleshill ...	15,898	645	24.6	202	12.7	249	15.7	9	26.1
Godiva ...	16,757	559	30.0	162	9.7	277	16.5	5	18.1
Holbrooks ...	14,062	821	17.1	115	8.2	185	13.1	8	43.2
Longford ...	20,590	2,266	9.1	223	10.8	715	34.7	18	25.2
Lower Stoke	19,805	849	23.3	180	9.1	265	13.4	8	30.2
Radford ...	20,245	673	30.0	169	8.3	220	10.9	7	31.8
St. Michaels	17,545	380	46.2	199	11.3	254	14.5	10	39.4
Sherbourne ...	16,856	596	28.3	157	9.5	146	8.7	5	34.2
Upper Stoke	21,310	826	25.8	176	8.3	207	9.7	6	28.9
Walsgrave ...	17,697	1,550	11.4	102	5.8	236	13.3	3	12.7
Westwood ...	19,093	2,118	9.0	131	6.9	336	17.6	8	23.8
Whoberley ...	13,333	1,284	10.4	134	10.1	231	17.3	8	34.6

*These figures do not include the inwardly transferable births

	Syphilis.		Gonorrhoea.		Other Conditions		TOTALS 1958.		TOTALS				
	M.	F.	M.	F.	M.	F.	M.	F.	1957	1956	1955	1954	
1. No of patients on 1st January under treatment or observation	131	139	51	10	103	64	285	213	498	451	481	513	559
2. No. of patients removed from the register during any previous year who returned during the year under report for treatment or observation of the same infection	5	4	1	—	—	—	6	4	10	11	12	11	
3. No. of patients dealt with for the first time during the year under report (exclusive of those under item 4) suffering from :—													
A. Syphilis, Primary	2	—	—	—	—	—	2	—	2	1	1	1	1
B. " Secondary... ..	2	1	—	—	—	—	2	1	2	1	—	—	—
C. " Latent in first year of infection... ..	3	1	—	—	—	—	—	1	1	1	2	6	6
D. " Cardio-vascular	11	2	—	—	—	—	11	2	13	7	2	3	11
E. " of the nervous system	11	12	—	—	—	—	11	12	23	17	13	22	22
F. " all other late or latent stages	—	—	—	—	—	—	—	—	—	1	2	—	—
G. " Congenital (under one year)	—	1	—	—	—	—	—	—	—	3	10	6	—
H. " .. (over one year)	—	—	126	25	—	—	126	25	151	104	119	135	—
I. Gonorrhoea	—	—	—	—	—	—	2	—	2	—	—	—	—
J. Chancroid	—	—	—	—	2	—	—	—	—	1	4	1	—
K. Lymphogranuloma Inguinale	—	—	—	—	—	—	—	—	—	—	—	—	—
L. Granuloma Venereum	—	—	—	—	—	—	—	—	—	—	—	—	—
M. Any other conditions requiring treatment	—	—	—	—	205	78	205	78	283	281	274	225	—
N. Conditions not requiring treatment	—	—	—	—	138	85	138	85	223	245	277	286	—
O. Conditions remaining undiagnosed at 31.12.58	—	—	—	—	—	2	—	2	2	3	1	—	—
*Other Conditions													
4. No. of patients dealt with for the first time who have been transferred from other centres (civil or service) or from practitioners approved under Ministry of Health Circular 2226	—	—	1	3	2	—	3	3	6	12	4	6	11
TOTALS OF ITEMS 1, 2, 3 & 4.	165	160	179	38	450	229	794	427	1221	1171	1161	1239	1280

Live Register of Tuberculosis Patients.

	Pulmonary Cases.			Non-Pulmonary Cases.			Total Cases (All Forms).		
	M.	F.	Total	M.	F.	Total	M.	F.	Total
1. No. on Register at 31/12/1957	1719	1212	2931	171	184	355	1890	1396	3286
2. Cases notified (or otherwise coming to knowledge) in 1958	187	132	319	17	11	28	204	143	347
3. Cases removed from Register 1958	226	136	362	22	23	45	248	159	407
4. No. on Register at 31/12/1958	1680	1208	2888	166	172	338	1846	1380	3226

Tuberculosis.

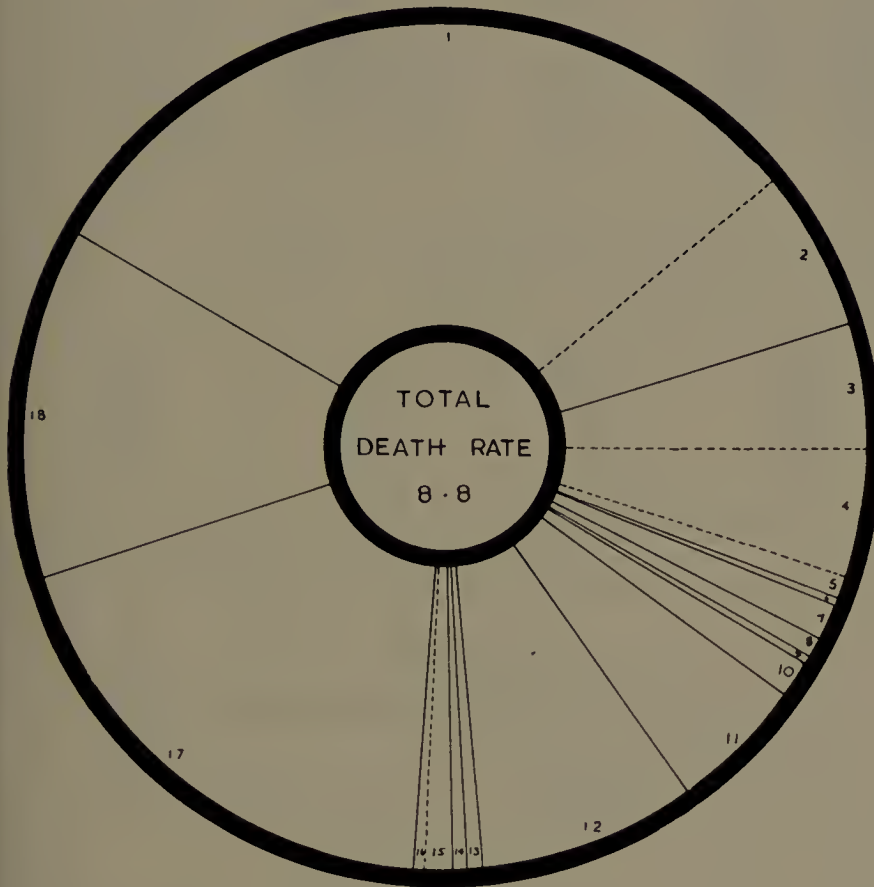
YEAR	CASES ON REGISTER		CASES NOTIFIED (or brought to notice)		DEATHS			
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary		Non-Pulmonary	
					No.	Rate	No.	Rate
1949	M.	1057	130	238	25	0.50	13	0.10
	F.	698	177	162	35		13	
1950	M.	1086	136	184	21	0.47	7	0.06
	F.	771	188	156	27		8	
1951	M.	1063	145	247	26	0.29	10	0.04
	F.	780	200	132	20		0	
1952	M.	1241	159	290	23	0.20	4	0.06
	F.	884	211	180	25		11	
1953	M.	1349	167	285	17	0.15	3	0.02
	F.	961	213	173	21		2	
1954	M.	1457	177	270	27	0.15	2	0.015
	F.	1051	215	163	15		2	
1955	M.	1587	185	289	20	0.16	2	0.015
	F.	1129	223	156	16		2	
1956	M.	1676	164	247	21	0.14	4	0.018
	F.	1204	181	171	30		1	
1957	M.	1719	171	222	28	0.11	2	0.007
	F.	1212	184	129	20		—	
1958	M.	1680	166	187	17	0.10	1	0.004
	F.	1208	172	132	11		0	

Cases of Infectious Diseases notified during the year 1958

NOTIFIABLE DISEASE.	Total number of cases notified.	NOTIFICATIONS IN AGE GROUPS						NOTIFICATIONS IN THE VARIOUS WARDS OF THE CITY																	
		Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 & upwards.	Bablake	Chart. & Binley	Cheylesmore	Earlsdon	Foleshill	Godiva	Holbrook	Longford	Lower Stoke	Radford	St. Michael's	Sherbourne	Upper Stoke	Walsgrave	Westwood	Whoherley	
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera (C) Plague (P)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Group)	3	—	—	3	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—
Erysipelas	25	1	—	1	1	8	12	2	2	4	3	1	1	1	—	2	3	2	2	7	1	1	2	—	—
Scarlet fever	160	1	43	107	8	1	—	—	13	13	10	14	4	1	9	52	3	5	7	2	2	13	12	10	1
Tonsillitis (Streptococcal)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid fever	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Para-typhoid fever	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis (Paralytic)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis (Non-paralytic)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	57	—	—	—	34	23	—	—	2	5	2	2	7	4	2	6	4	4	2	1	1	5	3	5	3
Meningococcal Infections	5	4	1	—	—	—	—	—	—	—	—	—	1	1	—	2	1	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Respiratory Tuberculosis	303	2	6	15	62	145	60	13	7	27	21	14	25	24	14	28	23	13	24	13	21	11	25	13	1
Other forms of Tuberculosis	26	—	—	2	4	14	5	1	2	—	—	—	3	4	—	1	2	2	3	1	1	2	4	3	—
Malaria	—	—	—	—	—	—	—	—	14	30	18	13	60	13	18	449	12	14	10	10	41	24	14	3	3
Dysentery	743	36	319	246	40	89	11	2	4	17	3	7	2	3	6	12	8	3	11	1	2	3	14	4	3
Acute Primary Pneumonia	93	7	8	14	4	20	26	14	4	17	3	7	2	3	6	12	8	3	11	1	2	3	4	4	7
Acute Influenzal Pneumonia	39	4	1	2	2	6	14	10	7	7	—	4	1	3	1	2	—	2	5	2	3	—	7	2	—
Acute Encephalitis	3	—	—	2	—	—	1	—	—	2	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Acute Polio-Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	705	29	320	346	8	2	—	—	11	20	12	10	6	12	19	73	33	18	25	4	88	104	198	72	4
Whooping Cough	81	9	41	31	3	17	2	—	4	6	2	3	7	1	5	7	6	4	2	11	2	8	19	19	5
Food Poisoning	33	—	5	6	3	17	2	—	3	—	—	—	—	—	—	—	1	—	12	—	1	—	—	—	—

PROPORTIONS OF DEATHS FROM PRINCIPAL CAUSES TO TOTAL DEATHS.

1958



THE TOTAL NUMBER OF DEATHS WAS 2,486

THE TOTAL DEATH RATE FROM ALL CAUSES WAS 8.8

KEY TO CHART — 1958

Cause of Death.	1,000 % per Population.	Cause of Death.	1,000 % per Population.
Diseases of the Heart	2.73	10. Congenital Malformations	0.12
Other Circulatory Diseases	0.55	11. Violence	0.45
Bronchitis	0.43	12. All Other Causes	0.75
Pneumonia	0.44	13. General Infectious Diseases	0.03
Other Respiratory Diseases	0.08	14. Influenza	0.04
Diarrhoea, and Enteritis	0.02	15. Respiratory Tuberculosis	0.09
Genito Urinary Diseases	0.11	16. Other Forms of Tuberculosis	0.01
Other Digestive Diseases	0.06	17. Cancer	1.69
Feveral Diseases	0.01	18. Diseases of Nervous System	1.19
			8.8

RAINFALL**Total Rainfall Recorded in Inches from 1895—1958**

	Average for 10 years	Highest	Lowest
1895 — 1904	24·41	32·75 in 1903	19·87 in 1898
1905 — 1914	26·47	37·02 in 1912	21·35 in 1905
1915 — 1924	27·25	31·96 in 1924	17·44 in 1921
1925 — 1934	26·95	33·09 in 1927	20·96 in 1934
1935 — 1944	25·67	32·81 in 1939	20·28 in 1943
1945 — 1954	25·69	32·49 in 1951	20·59 in 1947

TOTALS FOR THE PAST 10 YEARS

1949	22·81	1954	30·50
1950	24·79	1955	24·26
1951	32·49	1956	23·60
1952	25·86	1957	25·06
1953	20·89	1958	31·56

SUNSHINE**Total Sunshine Hours Recorded from 1895—1954**

	Average for 10 years	Highest	Lowest
1895 — 1904	1243	1495 in 1895	967 in 1902
1905 — 1914	1344	1555 in 1911	1052 in 1905
1915 — 1924	1307	1530 in 1921	1110 in 1920
1925 — 1934	1265	1489 in 1929	1087 in 1932
1935 — 1944	1270	1467 in 1940	1120 in 1936
1945 — 1954	1351	1587 in 1949	1144 in 1954

TOTALS FOR THE PAST 10 YEARS, 1949—1958

1949	1587	1954	1144
1950	1410	1955	1356
1951	1365	1956	1187
1952	1503	1957	1302
1953	1361	1958	1121

Lat. 52° 23' 26". Long. 1° 31' 4" W. Height of rim of rain gauge above Mean Sea Level, 338-ft.
The cistern of the barometer is situated 301.75 feet above sea level.

1958	Baro- meter Ins.	Air Temperature						Hygrometer				Earth Temp.		Bright Sunshine		Cloud at 9 a.m. (Scale 0-8)	Rain and other Forms of Precipitation					Weather Number of days of							Wind Force (0-8)	Wind Directions, No. of daily observations each month																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
		Mean of		Difference from Average	Absolute Minimum and Maximum		Mean of Observa- tions at 9 a.m.				At 1 foot depth		At 4 feet depth		Daily Mean		Percentage of Average	Number of Days	Total Fall	Percentage of Average	Amount	Most in a Day	Snow or Sleet	Hail	Thunder heard	Fog (9h. G.M.T.)	Air Frost	Ground Frost		Number of Obser- vations of Moderate and Strong Winds	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
		A	B		Minimum	Maximum	Day of Month	Maximum	Day of Month	Dry Bulb	Depression of Wet Bulb	Vapour Pressure	Humidity																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
	Mean Pressure at 32° F. at Sea Level																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															</

Meteorological Station moved from City Hospital, Whitley, to the Memorial Park, 1.4.51.
Atmospheric Pollution Recorders moved from Whitley Pumping Station to Whitley Waterworks 1 mile S.E.
Atmospheric Pollution Recorders moved from Edgwick Park to Foleshill Road Day Nursery, 50 yards N.W. } 1.9.51

INDEX

A		Page			Page
Abattoir, Public, Work of	...	129—135	Death Rate (Phthisis)	...	8
Accidents in the Home	...	79—80	Death Rate (Tuberculosis)	...	8
Administrative and Clerical Staff	...	4	Death Rate (Cancer)	...	8
Air Pollution Stations	...	118—119	Deaths, Proportions to total (Chart)	...	177
Air Pollution	...	114—124	Dental Care	...	37—39
Air Pollution Charts	...	121—122	District Inspectors (Work of)	...	101—103
Ambulance Service Staff	...	6	Dust Bins	...	106
Ambulance Service	...	58—72	Dwellings (Inhabited)	...	8
Area	...	8	Dysentery (Survey)	...	56—57
B			F		
Bakehouses	...	161	Factories' Act, 1937 & 1948	...	159—161
Bedding, Provision of	...	73	Food—Bacteriological Examination	...	143
Births, Legitimate	...	8	Food and Drugs Act, 1955, Administration	...	141—143
„ Illegitimate	...	8	Food and Drugs Sampling and Analysis	...	144—153
„ Still	...	8	Food Hygiene Regulations, 1955	...	154—155
Birth Rate	...	8 & 19	Food Inspection (Visits)	...	142
Blind Welfare Staff	...	6	Food and Drugs found to be deficient or in excess of the quantities stated on the label	...	151—152
C			Foods found to be contaminated with Arsenic, Copper, Iron and Lead	...	149—150
Canal Boats	...	125	G		
Cancer	...	74	General Statistics	...	8
Cancer (Death Rate)	...	8	Graph, Work at Public Abattoir	...	129—133
Care of Mothers and Young Children	...	33—42	Graph, Disease Incidence in Animals Slaughtered	...	134
Care of Premature Infants	...	37	H		
Care and After-Care, Prevention of Illness	...	73—75	Hairdressers' and Barbers' Premises	...	163—164
Cesspools, Abolition of	...	104	Health Centres	...	31—33
Child Welfare Clinics	...	33—34	Health Committee	...	3
Clean Air Act, 1956	...	114—124	Health Department Staff	...	4—7
Cleansing	...	21	Health Visitors' Staff	...	4
Common Lodging Houses	...	113—114	Health Visiting	...	43—47
Contents	...	2	Health Education	...	76—78 & 155—157
Convalescence	...	78	Home Help Service	...	80—82
Coventry Corporation Act, 1948	...	143 & 163	Home Help Service Staff	...	5
Crematorium	...	94	Home Nursing Service Staff	...	5
D					
Day Nurseries' Staff	...	5			
Day Nurseries	...	39—41			
Death Rate (General)	...	8 & 19			
Deaths, Causes and Ages	...	166			
Deaths (Childbirth)	...	8			
Death Rate (Infants)	...	8			
Deaths (Infectious Diseases)	...	8			
Death Rate (Respiratory)	...	8			

INDEX—continued

	Page		Page
Home Nursing	48—51	Occupational Therapy ...	74
Hospitals	94	Occupation Centres Staff ...	6
Housing	108—111	Occupation Centres ...	90
Housing Act 1957—Overcrowding	96	Offensive Trades	114
I		O	
Ice Cream	141	P	
Immunisation Service	52	Pensioners' Committee ...	3
Index	181	Pests Act, 1949 (prevention of damage)	161—162
Infant Mortality Chart ...	170	Pet Animals Act, 1951 ...	163
Infantile Mortality	8 & 19	Pig-Keeping	107
Infant Mortality (Ages Tables)...	169	Poliomyelitis	20, 53 & 54
Infectious Diseases	20	Population	8 & 19
Infectious Diseases (Notification Tables)	176	Premature Infants, Care of ...	37
M		Prevention of Illness	73—75
Magisterial Proceedings ...	157—159	Public Health Inspector (Chief) Report of	97
Markets, Shops and Stores Inspection	153	Puerperal Deaths	8
Marriage Rates	8 & 19	R	
Mass Radiography	22—24	Rainfall Records	178
Maternal Mortality	8 & 19	Rateable Value of City ...	8
Maternity Outfits, Provision of	39	Rates (Sum represented by Penny Rate)	8
Meals for Sick and Aged ...	75	Refuse Disposal	105
Meat Inspection	126—127	Refuse Tips	163
Mental Defective Acts, 1913/1938	86	References to other Departments	107
Mental Defectives' Register ...	86	Removal of Persons	91
Mental Health	82—90	Rivers and Streams	125—126
Mental Health Lunacy Acts, 1890/1	85	S	
Mental Treatment Acts, 1930 ...	86	Sanitary Provision and Refuse Disposal	105
Meteorological Observations ...	179	Scabies	21
Midwifery	41—43	Smoke Control Areas	118
Milk	139	Staff Changes	96
Milk—Designated	139—140	Statistical Tables and Charts (List)	165
Milk, Bacteriological Examination	140	Statistics (Vital, of City) ...	167
Milk Purveyors	139	„ (Vital, of Coventry, England and Wales) ...	168
Milk Sampling	147	„ Comparative (16 City Wards)	172
M.O.H. Preamble	9—18	„ Historical Summary ...	171
Mother and Baby Home	41	„ Wards of City	172
Movable Dwellings	112—113	Summary of Inspectors' Work ...	102
Municipal Midwives' Staff ...	5	Summary of Miscellaneous Work for the past 10 years ...	103
N		Sunshine Records	178
National Assistance Act, 1948 ...	91		
National Health Service Act, 1946 (The first 10 years) ...	24—28		
National Health Service Act ...	31		
Neo-natal Mortality	19		
Nursing Equipment and Apparatus	75		

INDEX—continued

	Page		U		Page
Superannuation (Medical Examinations)	95	Unmarried Mothers and their Children			41
Suppression of Nuisances (Sanitary)	102				
			V		
			Vaccination Service		52—55
			Venereal Diseases (Survey)		21 & 74
			Venereal Diseases (Tables)		173—174
			Verminous Premises		106
				W	
Tips	163	Warwickshire Council... ..	Clean Air		119—124
Tuberculosis (Survey of) 21—24 & 73		Water Supply			92
" (Live Register)	175	Water Supply, Chemical and Bacteriological Analyses			93
" (Summary of Cases Notified)	175	Welfare Foods, Supply of			39
" (Summary of Cases on Register)	175	Welfare of Old People			29—30
" (Summary of Deaths Notified during 1954 and Previous Years)	175				
" Death Rate from other forms	175				